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| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | dentify Yourself   |  |   |
|-----|--|--|---|
|     |  | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name   |  |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your | John First name  M Middle name  Walker   | Kiahini First name  N Middle name  Dupont     |
|     | meeting with the trustee.  | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | All other names you have used in the last 8 years  |  |   |
|     | Include your married or maiden names.  |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-9007                              | xxx-xx-7725                                   |

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Debtor 1 John M Walker Debtor 2 Kiahini N Dupont

Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs.  Business name(s)  EINs  | ■ I have not used any business name or EINs.  Business name(s)  |
| 5. | Where you live   | 219 Carolina St<br>Bolingbrook, IL 60490  | If Debtor 2 lives at a different address:   |
|    |  | Number, Street, City, State & ZIP Code  Will  | Number, Street, City, State & ZIP Code  |
|    |  | County  | County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |
|    |  |   |   |

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Debtor 1 John M Walker Debtor 2 Kiahini N Dupont Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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|      | tor 1 <b>John M Walker</b><br>tor 2 <b>Kiahini N Dupont</b>   |                        | Docume  | Case number (if known)  |
|------|---|------------------------|---|---|
|      |   |                        |   |   |
| Part | Report About Any Bu   | sinesses `             | You Own as a Sole Proprie                           | or  |
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.                  | Go to Part 4.                                       |   |
|      |   | ☐ Yes.                 | Name and location of bus                            | iness   |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                        | Name of business, if any                            |   |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |                        | Number, Street, City, Sta                           | e & ZIP Code  |
|      | it to this petition.  |                        | Check the appropriate bo                            | x to describe your business:  |
|      |   |                        | ☐ Health Care Busing                                | ness (as defined in 11 U.S.C. § 101(27A))   |
|      |   |                        | ☐ Single Asset Real                                 | Estate (as defined in 11 U.S.C. § 101(51B))   |
|      |   |                        | ☐ Stockbroker (as d                                 | efined in 11 U.S.C. § 101(53A))   |
|      |   |                        | ☐ Commodity Broke                                   | r (as defined in 11 U.S.C. § 101(6))  |
|      |   |                        | □ None of the above                                 | •   |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a <i>small business</i><br>debtor?  | deadlines<br>operation | . If you indicate that you are                      | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
|      | For a definition of small   | ■ No.                  | I am not filing under Chap                          | ter 11.   |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                  | I am filing under Chapter<br>Code.                  | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|      |   | ☐ Yes.                 | I am filing under Chapter                           | 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   |
| Part | t 4: Report if You Own or   | Have Any               | Hazardous Property or An                            | y Property That Needs Immediate Attention   |
| 14.  | Do you own or have any property that poses or is  | ■ No.                  |   |   |
|      | alleged to pose a threat of imminent and identifiable hazard to   | ☐ Yes.                 | What is the hazard?                                 |   |
|      | public health or safety?  |                        |   |   |
|      | Or do you own any property that needs immediate attention?  |                        | If immediate attention is needed, why is it needed? |   |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |                        | Where is the property?                              | Number, Street, City, State & Zip Code  |
|      |   |                        |   | Hambor, Greek, Oity, Glate & Zip Gode   |

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Debtor 1 John M Walker

Debtor 2 Kiahini N Dupont Case number (if known)

Part 5: Explain

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-35110 Doc 1 Filed 11/26/17 Entered 11/26/17 22:12:49 Desc Main Document Page 6 of 83

|      | tor 1 John M Walker<br>tor 2 Kiahini N Dupont                  |                            | Document  | rage o o                         |  | ımber (if known)           |  |
|------|--|----------------------------|---|----------------------------------|--|----------------------------|--|
| Part |  | ons for Peno               | rting Purnoses  |                                  |  |                            |  |
|      | What kind of debts do  | •                          | e your debts primarily consun   | ner dehts? Cons                  | sumer debts are                          | defined in 11 I I S C 8    | \$ 101(8) as "incurred by an                       |
| 10.  | you have?  |                            | dividual primarily for a personal,                                      |                                  |  | defined in 11 0.5.C.       | g 101(o) as illiculted by all                      |
|      |  |                            | No. Go to line 16b.   |                                  |  |                            |  |
|      |  |                            | Yes. Go to line 17.   |                                  |  |                            |  |
|      |  |                            | e your debts primarily busines<br>oney for a business or investmer      |                                  |  |                            |  |
|      |  |                            | No. Go to line 16c.   | 0                                | •  |                            |  |
|      |  |                            | Yes. Go to line 17.   |                                  |  |                            |  |
|      |  | 16c. Sta                   | ate the type of debts you owe that                                      | at are not consur                | ner debts or bus                         | siness debts               |  |
| 17.  | Are you filing under<br>Chapter 7?                             | □ No. Ia                   | m not filing under Chapter 7. Go  | to line 18.                      |  |                            |  |
|      | Do you estimate that after any exempt property is excluded and |                            | m filing under Chapter 7. Do you<br>e paid that funds will be available |                                  |  |                            | and administrative expenses                        |
|      | administrative expenses are paid that funds will               | -                          | No  |                                  |  |                            |  |
|      | be available for distribution to unsecured creditors?          |                            | Yes   |                                  |  |                            |  |
| 18.  | How many Creditors do  | □ 1-49                     |   | <b>1</b> ,000-5,000              |  | □ 25,001-5                 |  |
|      | you estimate that you owe?                                     | 50-99                      |   | ☐ 5001-10,000<br>☐ 10,001-25,0   |  | ☐ 50,001-1<br>☐ More tha   |  |
|      |  | ☐ 100-199<br>☐ 200-999     |   | <b>1</b> 0,001-23,0              | 00                                       | □ More the                 | arrioo,000   |
| 19.  | How much do you  | □ \$0 - \$50,0             | 000   | □ \$1,000,001                    | - \$10 million                           | □ \$500,00                 | 0,001 - \$1 billion                                |
|      | estimate your assets to be worth?                              | \$50,001 -                 |   | □ \$10,000,001                   |  |                            | 000,001 - \$10 billion                             |
|      |  | □ \$100,001<br>□ \$500,001 |   | □ \$50,000,001<br>□ \$100,000,00 | )1 - \$500 million<br>)1 - \$500 million |                            | ,000,001 - \$50 billion<br>an \$50 billion         |
| 20.  | How much do you  | <b>□</b> \$0 - \$50,0      | 000   | □ \$1,000,001                    | - \$10 million                           | □ \$500,00                 | 0,001 - \$1 billion                                |
|      | estimate your liabilities to be?                               | \$50,001                   |   | □ \$10,000,001<br>□ \$50,000,001 |  |                            | 000,001 - \$10 billion<br>0,000,001 - \$50 billion |
|      |  | ■ \$100,001<br>□ \$500,001 |   |                                  | )1 - \$500 million                       |                            | an \$50 billion                                    |
| Part | 7: Sign Below  |                            |   |                                  |  |                            |  |
| For  | you  | I have exami               | ned this petition, and I declare u                                      | nder penalty of p                | perjury that the in                      | nformation provided is     | true and correct.                                  |
|      |  |                            | sen to file under Chapter 7, I am<br>s Code. I understand the relief a  |                                  |  |                            |  |
|      |  |                            | represents me and I did not pathave obtained and read the notion        |                                  |  |                            | elp me fill out this                               |
|      |  | I request reli             | ef in accordance with the chapte  | r of title 11, Unite             | ed States Code,                          | specified in this petition | on.  |
|      |  |                            | making a false statement, concasse can result in fines up to \$25       |                                  |  |                            |  |
|      |  | /s/ John M<br>John M Wa    |   |                                  | /s/ Kiahini N<br>Kiahini N Du            |                            |  |
|      |  | Signature of               |   |                                  | Signature of Do                          |                            |  |
|      |  | Executed on                | November 26, 2017   |                                  | Executed on                              | November 26, 201           | 17   |
|      |  |                            | MM / DD / YYYY  |                                  |  | MM / DD / YYYY             |  |

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|----------------------|--|--|-----------------------------|---|
| Debtor 1<br>Debtor 2 | John M Walker<br>Kiahini N Dupont                    |  | Cas                         | se number (if known)  |
|                      |  |  |                             |   |
|                      | attorney, if you are<br>ed by one                    | under Chapter 7, 11, 12, or 13 of title 11, Unit | ted States Code, and have e | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
|                      | not represented by<br>ey, you do not need<br>a page. |  |                             | vledge after an inquiry that the information in the   |
|                      |  | /s/ Julie M Gleason                              | Date                        | November 26, 2017   |
|                      |  | Signature of Attorney for Debtor                 |                             | MM / DD / YYYY  |
|                      |  | Julie M Gleason 6273536                          |                             |   |
|                      |  | Printed name                                     |                             |   |
|                      |  | Gleason & Gleason                                |                             |   |
|                      |  | 77 W Washington, Ste 1218                        |                             |   |
|                      |  | Chicago, IL 60602                                |                             |   |
|                      |  | Number, Street, City, State & ZIP Code           |                             |   |
|                      |  | Contact phone                                    | Email address               |   |

**6273536**Bar number & State

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|---------------------|--------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |                  |                                      |
| Debtor 1            | John M Walker            |                   |                  |                                      |
|                     | First Name               | Middle Name       | Last Name        |                                      |
| Debtor 2            | Kiahini N Dupont         |                   |                  |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |                                      |
| Case number         |                          |                   |                  |                                      |
| (if known)          |                          |                   |                  | ☐ Check if this is an amended filing |

# Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part | 1: Summarize Your Assets   |             |                           |
|------|--|-------------|---------------------------|
|      |  | Your a      | essets<br>of what you own |
| 1.   | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 0.00                      |
|      | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 72,360.00                 |
|      | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 72,360.00                 |
| Part | 2: Summarize Your Liabilities  |             |                           |
|      |  |             | iabilities<br>nt you owe  |
| 2.   | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 49,099.00                 |
| 3.   | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 15,000.00                 |
|      | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 88,335.00                 |
|      | Your total liabilities   | \$          | 152,434.00                |
| Part | 3: Summarize Your Income and Expenses  |             |                           |
| 4.   | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 7,634.17                  |
| 5.   | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 7,600.00                  |
| Part | 4: Answer These Questions for Administrative and Statistical Records   |             |                           |
| 6.   | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo                      | ur other so | hedules.                  |
| 7.   | ■ Yes What kind of debt do you have?   |             |                           |
|      | - Vous debte are primarily concurred debte. Consumer debte are these (Consumed by an individual primarily for  |             | familia an                |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 John M Walker
Debtor 2 Kiahini N Dupont Document Page 9 of 83

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

11,715.93

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total clair | n         |
|--|-------------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |             |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 15,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00      |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 15,000.00 |

|                                      | С                                      | ase 17-35110 Doc 1  | Filed 11/26/17                             | Entered 11/26/<br>Page 10 of 83 | 17 22:12:49                            | Desc N        | ⁄lain                              |
|--------------------------------------|--|---|--|---------------------------------|--|---------------|------------------------------------|
| Fill in                              | this info                              | rmation to identify your case a   |  | 1 7000 107 (71 (7)              |  |               |                                    |
| Debtor                               | r 1                                    | John M Walker   |  |                                 |  |               |                                    |
|                                      |  | First Name  | Middle Name                                | Last Name                       |  |               |                                    |
| Debtor<br>(Spouse,                   |  | Kiahini N Dupont First Name   | Middle Name                                | Last Name                       |  |               |                                    |
|                                      |  |   |  |                                 |  |               |                                    |
| United                               | States B                               | ankruptcy Court for the: NORT   | HERN DISTRICT OF ILLIN                     | IOIS                            |  |               |                                    |
| Case r                               | number                                 |   |  | -                               |  |               | Check if this is an amended filing |
| Sch<br>n each<br>hink it t<br>nforma | category,<br>fits best.<br>tion. If mo | le A/B: Property separately list and describe items. Be as complete and accurate as poore space is needed, attach a separ | List an asset only once. If a              | are filing together, both a     | re equally responsible                 | for supplyin  | ng correct                         |
| Answer                               | every que                              | estion.   |  |                                 |  |               |                                    |
| Part 1:                              | Describ                                | e Each Residence, Building, Land,   | or Other Real Estate You Ow                | n or Have an Interest In        |  |               |                                    |
| . Do y                               | ou own or                              | have any legal or equitable interes   | st in any residence, building,             | land, or similar property?      |  |               |                                    |
| ■ N                                  | o. Go to Pa                            | and O   |  |                                 |  |               |                                    |
|                                      |  | is the property?  |  |                                 |  |               |                                    |
| <b>□</b> 16                          | es. Where                              | is the property?  |  |                                 |  |               |                                    |
| Part 2:                              | Describ                                | e Your Vehicles   |  |                                 |  |               |                                    |
| omeor                                | ne else di                             | ase, or have legal or equitable rives. If you lease a vehicle, also rucks, tractors, sport utility ve                     | report it on Schedule G: Ex                |                                 |  | any vehicles  | s you own that                     |
| □N                                   | ٥                                      |   |  |                                 |  |               |                                    |
|                                      | -                                      |   |  |                                 |  |               |                                    |
| Y                                    | es                                     |   |  |                                 |  |               |                                    |
| 3.1                                  | Make:                                  | Ford  | Who has an interest in the                 | nronerty? Check one             | Do not deduct secu                     | red claims o  | r exemptions. Put                  |
|                                      | Model:                                 | Taurus  | ■ Debtor 1 only                            | property: Glicok one            | the amount of any s                    |               |                                    |
|                                      | Year:                                  | 2008  | Debtor 2 only                              |                                 | Current value of t                     |               |                                    |
|                                      | Approxima                              | ate mileage: 90000  | Debtor 1 and Debtor 2 of                   | only                            | entire property?                       |               | tion you own?                      |
| -                                    | Other info                             |   | At least one of the debto                  | ors and another                 |  |               |                                    |
|                                      | Motor V                                | ehicle:   | Check if this is commu (see instructions)  | unity property                  | \$2,700                                | 00 _          | \$2,700.00                         |
|                                      | Make:                                  | Ford  | Who has an interest in the                 | e property? Check one           | Do not deduct secuthe amount of any    | secured clain | ns on Schedule D:                  |
|                                      | Model:                                 | Expedition  | Debtor 1 only                              |                                 | Creditors Who Hav                      | e Claims Se   | cured by Property.                 |
|                                      | Year:<br>Approxima                     | 2009<br>ate mileage: 134000   | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 of | anly                            | Current value of t<br>entire property? |               | rent value of the tion you own?    |
|                                      | Other info                             |   | ☐ At least one of the debte                | •                               | onthis property:                       | pon           | ,                                  |
| Г                                    |  |   |  |                                 |  |               |                                    |

Official Form 106A/B Schedule A/B: Property page 1

☐ Check if this is community property (see instructions)

\$6,000.00

\$6,000.00

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| 3.3                          | Make: Harley Davidson  | Who has an interest in the property? Check one   |  | laims or exemptions. Put ed claims on Schedule D:   |
|------------------------------|--|--|--|---|
|                              | Model: RD Glide  | Debtor 1 only  | Creditors Who Have Clair               | ims Secured by Property.  |
|                              | Year: <b>2016</b>  | Debtor 2 only  | Current value of the                   | Current value of the  |
|                              | Approximate mileage: 3000  | Debtor 1 and Debtor 2 only   | entire property?                       | portion you own?  |
|                              | Other information:   | ☐ At least one of the debtors and another  |  |   |
|                              | NADA   | ☐ Check if this is community property (see instructions)   | \$15,000.00                            | \$15,000.00   |
| 4                            | Make: Harley Davidson  | Who has an interest in the property? Check one   |  | laims or exemptions. Put  |
|                              | Model: Rd Glide  | ☐ Debtor 1 only  |  | ed claims on Schedule D: ims Secured by Property.   |
|                              | Year: <b>2016</b>  | ■ Debtor 2 only  |  |   |
|                              |  |  | Current value of the                   | Current value of the  |
|                              | Approximate mileage:  Other information:   | Debtor 1 and Debtor 2 only   | entire property?                       | portion you own?  |
| Г                            | Oner information.  | ☐ At least one of the debtors and another  |  |   |
|                              |  | Check if this is community property (see instructions)   | \$20,000.00                            | \$20,000.00   |
| ixar<br>IN<br>IY             | mples: Boats, trailers, motors, personal volo ves  | and other recreational vehicles, other vehicles, and vatercraft, fishing vessels, snowmobiles, motorcycle a water craft and the state of the state o | ny entries for                         | \$43,700.00   |
| xar<br>I <sub>N</sub><br>I Y | mples: Boats, trailers, motors, personal volves  de the dollar value of the portion you of ges you have attached for Part 2. Write  Describe Your Personal and Household   | watercraft, fishing vessels, snowmobiles, motorcycle a wn for all of your entries from Part 2, including an e that number here   | ny entries for                         | Current value of the  |
| Addepage                     | mples: Boats, trailers, motors, personal volo Yes  Id the dollar value of the portion you oges you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable   | vatercraft, fishing vessels, snowmobiles, motorcycle a wn for all of your entries from Part 2, including an e that number here   | ny entries for                         | <u> </u>  |
| Addepage                     | mples: Boats, trailers, motors, personal value  do the dollar value of the portion you or ges you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable  usehold goods and furnishings  amples: Major appliances, furniture, liner   | watercraft, fishing vessels, snowmobiles, motorcycle a wn for all of your entries from Part 2, including an e that number here   | ny entries for                         | Current value of the portion you own? Do not deduct secured                                 |
| Addepage                     | mples: Boats, trailers, motors, personal value  do the dollar value of the portion you or ges you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable susehold goods and furnishings amples: Major appliances, furniture, liner No  Yes. Describe  | watercraft, fishing vessels, snowmobiles, motorcycle a wn for all of your entries from Part 2, including an e that number here   | ny entries for                         | Current value of the portion you own? Do not deduct secured claims or exemptions.           |
| Addipage                     | mples: Boats, trailers, motors, personal value  do the dollar value of the portion you or ges you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable susehold goods and furnishings amples: Major appliances, furniture, liner No  Yes. Describe  | watercraft, fishing vessels, snowmobiles, motorcycle a wind for all of your entries from Part 2, including an e that number here  Items Interest in any of the following items?  Ins, china, kitchenware  In Goods (Bedroom Furniture, Kitchen App   | ny entries for                         | Current value of the portion you own? Do not deduct secured                                 |
| Add page                     | mples: Boats, trailers, motors, personal vido Yes  Id the dollar value of the portion you of ges you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable susehold goods and furnishings amples: Major appliances, furniture, liner No Yes. Describe  Misc. Household   | watercraft, fishing vessels, snowmobiles, motorcycle a wind for all of your entries from Part 2, including an e that number here  Items Interest in any of the following items?  Ins, china, kitchenware  In Goods (Bedroom Furniture, Kitchen App   | ny entries for                         | Current value of the portion you own? Do not deduct secured claims or exemptions.           |
| Add.pag                      | In the dollar value of the portion you oges you have attached for Part 2. Write:  Describe Your Personal and Household ou own or have any legal or equitable ou own or have any legal or equitable.  Wisc. Househous tables, chairs, and radios; audio, vincluding cell phones, cameras, amples: Televisions and radios; audio, vincluding cell phones, cameras, | wn for all of your entries from Part 2, including an e that number here  | liances,                               | Current value of the portion you own? Do not deduct secured claims or exemptions. \$1,300.0 |
| Add.pag                      | mples: Boats, trailers, motors, personal value  of the dollar value of the portion you of ges you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable susehold goods and furnishings amples: Major appliances, furniture, liner No  Yes. Describe  Misc. Household tables, chairs,  ctronics  amples: Televisions and radios; audio, voincluding cell phones, cameras,  No  Yes. Describe  | wn for all of your entries from Part 2, including an e that number here  | liances,  rs, scanners; music collecti | Current value of the portion you own? Do not deduct secured claims or exemptions. \$1,300.0 |

other collections, memorabilia, collectibles

☐ No

page 2

Case 17-35110 Doc 1 Filed 11/26/17 Entered 11/26/17 22:12:49 Desc Main Page 12 of 83 Document John M Walker Debtor 1 Debtor 2 Kiahini N Dupont Case number (if known) Yes. Describe..... \$200.00 Books, Pictures, Videos, and DVDs 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe..... 2 handguns - Scy and Ruger \$400.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

□ No
■ Yes. Describe.....

Used Clothing \$500.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

Misc. Costume Jewelry, watches or wedding bands \$500.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here ......

\$3,800.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

■ Yes.....

Cash on Hand

\$75.00

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| Debtor 2  Kiahini N D  |           |  | Case number (if known)   |                     |
|--|-----------|--|--|---------------------|
| 17. Deposits of money  Examples: Checking                        | savings o | or other financial accoun                  | nts; certificates of deposit; shares in credit unions, brokerage houses, and   | d other similar     |
|  |           |  | ith the same institution, list each.   | rottier similar     |
| □ No   |           |  | Institution name:  |                     |
| Yes  |           |  | Institution name:  |                     |
|  | 17.1.     | Checking and<br>Savings                    | US Bank  | \$500.00            |
|  |           |  |  |                     |
|  | 17.2.     | Checking and<br>Savings                    | Ally Bank  | \$400.00            |
|  | 17.3.     | Checking and<br>Savings                    | US Bank  | \$250.00            |
|  | 17.4.     | Savings                                    | Burlington CU  | \$100.00            |
| 18. <b>Bonds, mutual funds,</b> <i>Examples:</i> Bond funds ■ No |           | ent accounts with broke                    | erage firms, money market accounts   |                     |
| ☐ Yes  |           | Institution or issuer nar                  | me:  |                     |
| 19. Non-publicly traded s<br>joint venture<br>☐ No               | tock and  | interests in incorpora                     | nted and unincorporated businesses, including an interest in an LLC  | ;, partnership, and |
| ■ Yes. Give specific in  |           | about them<br>me of entity:                | % of ownership:  |                     |
|  |           | ers By Jay - deskto<br>ntracts or accounts |  | \$1.00              |
| Negotiable instrument  | s include | personal checks, cashie                    | able and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them. |                     |
| ☐ Yes. Give specific inf   | ormation  | about them                                 |  |                     |
|  | Iss       | uer name:                                  |  |                     |
| 21. <b>Retirement or pensio</b> Examples: Interests in  □ No     |           |  | (b), thrift savings accounts, or other pension or profit-sharing plans   |                     |
| Yes. List each accou   |           | tely.<br>of account:                       | Institution name:  |                     |
|  |           |  | 401(k) w/ Current Employer - 100% exempt   | \$10,000.00         |
|  |           |  |  |                     |
|  |           |  | 401K with current employer - 100% exempt   | \$1,500.00          |
|  |           |  | Old 401K from prior job -100% exempt   | \$500.00            |
| Examples: Agreement  | ed deposi | ts you have made so th                     | at you may continue service or use from a company<br>blic utilities (electric, gas, water), telecommunications companies, or othe  | ers                 |
| ■ No<br>□ Yes  |           |  | Institution name or individual:  |                     |
| ↑ es   |           |  | monutation name of marvidual.  |                     |

Schedule A/B: Property

Official Form 106A/B

Entered 11/26/17 22:12:49 Case 17-35110 Doc 1 Filed 11/26/17 Desc Main Page 14 of 83 Document Debtor 1 John M Walker Debtor 2 Kiahini N Dupont Case number (if known) 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements  $\hfill \square$  Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Expected refunds - expect to be taken by student loans and debt owed to IRS \$11.534.00 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

ΠNο

Yes. Name the insurance company of each policy and list its value.

Company name: Beneficiary: Surrender or refund

value:

**Both debtors have Term Life Insurance** Policy w/ Employer - No CSV

\$0.00

#### 32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Entered 11/26/17 22:12:49 Case 17-35110 Doc 1 Filed 11/26/17 Desc Main Document Page 15 of 83 Debtor 1 John M Walker Debtor 2 Kiahini N Dupont Case number (if known) ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue □ No Yes. Describe each claim....... Personal Injury suit Unknown 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim........ 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$24,860.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ...... \$0.00 56. Part 2: Total vehicles, line 5 \$43,700.00 Part 3: Total personal and household items, line 15 \$3,800.00 Part 4: Total financial assets, line 36 \$24,860.00 Part 5: Total business-related property, line 45 \$0.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

\$72,360.00

\$0.00

\$0.00

Copy personal property total

\$72,360.00

\$72,360.00

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Debtor 1 John M Walker
Debtor 2 Kiahini N Dupont

Case number (if known)

Official Form 106A/B Schedule A/B: Property page 7

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|                     |                          | 17(7(.1111))      |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Fill in this infor  | mation to identify your  | case:             |             |  |
| Debtor 1            | John M Walker            |                   |             |  |
|                     | First Name               | Middle Name       | Last Name   |  |
| Debtor 2            | Kiahini N Dupont         |                   |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |
|                     |                          |                   |             |  |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim |   | Specific laws that allow exemption |
|--|--------------------------------------|-----------------------------------|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Che                               | eck only one box for each exemption.                            |                                    |
| 2008 Ford Taurus 90000 miles<br>Motor Vehicle:   | \$2,700.00                           |                                   | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Line from Schedule A/B: 3.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2016 Harley Davidson RD Glide 3000 miles   | \$15,000.00                          |                                   | \$856.00  | 735 ILCS 5/12-1001(b)              |
| NADA Line from Schedule A/B: 3.3   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
|  |                                      |                                   | any apphoasis statutory initia                                  |                                    |
| Misc. Household Goods (Bedroom Furniture, Kitchen Appliances,                          | \$1,300.00                           |                                   | \$1,300.00  | 735 ILCS 5/12-1001(b)              |
| tables, chairs, sofas) Line from Schedule A/B: 6.1                                     |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Consumer Electronics (Including Televisions, Radios, Computers,                        | \$400.00                             |                                   | \$400.00  | 735 ILCS 5/12-1001(b)              |
| Games, Phones, Stereos) Line from Schedule A/B: 7.1                                    |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Books, Pictures, Videos, and DVDs Line from Schedule A/B: 8.1                          | \$200.00                             |                                   | 100%  | 735 ILCS 5/12-1001(a)              |
| Elito from <i>Goriedale A/D</i> . <b>9.1</b>   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |

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John M Walker Debtor 1 Kiahini N Dupont Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2 handguns - Scy and Ruger 735 ILCS 5/12-1001(b) \$400.00 \$400.00 Line from Schedule A/B: 10.1 100% of fair market value, up to any applicable statutory limit **Used Clothing** 735 ILCS 5/12-1001(a) \$500.00 100% Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Misc. Costume Jewelry, watches or 735 ILCS 5/12-1001(b) \$500.00 \$500.00 wedding bands Line from Schedule A/B: 12.1 П 100% of fair market value, up to any applicable statutory limit Cash on Hand 735 ILCS 5/12-1001(b) \$75.00 \$75.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking and Savings: US Bank** 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking and Savings: Ally Bank** 735 ILCS 5/12-1001(b) \$400.00 \$400.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Checking and Savings: US Bank 735 ILCS 5/12-1001(b) \$250.00 \$250.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit Savings: Burlington CU 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 17.4 100% of fair market value, up to any applicable statutory limit 401(k) w/ Current Employer - 100% 735 ILCS 5/12-1006 \$10,000.00 100% exempt Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401K with current employer - 100% 735 ILCS 5/12-1006 \$1,500.00 exempt Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Old 401K from prior job -100% 735 ILCS 5/12-1006 \$500.00 100% exempt

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 21.3

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John M Walker

Kiahini N Dupont Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Federal: Expected refunds - expect to 42 U.S.C. § 407 \$5,910.00 \$11,534.00 be taken by student loans and debt owed to IRS 100% of fair market value, up to Line from Schedule A/B: 28.1 any applicable statutory limit Federal: Expected refunds - expect to 735 ILCS 5/12-1001(b) \$3,219.00 \$11,534.00 be taken by student loans and debt owed to IRS 100% of fair market value, up to Line from Schedule A/B: 28.1 any applicable statutory limit **Personal Injury suit** 735 ILCS 5/12-1001(h)(4) Unknown \$15,000.00 Line from Schedule A/B: 33.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

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|          |                           |                                   | Document F  | 2ade 20 (       | OT 83                              |                          |                          |
|----------|---------------------------|-----------------------------------|---|-----------------|------------------------------------|--------------------------|--------------------------|
| Fill     | in this informa           | ation to identify your            | case:   |                 |                                    |                          |                          |
| Deb      | tor 1                     | John M Walker                     |   |                 |                                    |                          |                          |
|          |                           | First Name                        | Middle Name L   | ast Name        |                                    |                          |                          |
|          | tor 2                     | Kiahini N Dupon                   |   |                 |                                    |                          |                          |
| (Spot    | use if, filing)           | First Name                        | Middle Name L   | ast Name        |                                    |                          |                          |
| Unit     | ed States Bank            | cruptcy Court for the:            | NORTHERN DISTRICT OF ILLIN  | OIS             |                                    |                          |                          |
|          |                           |                                   |   |                 |                                    |                          |                          |
| (if kno  | e number                  |                                   |   |                 |                                    | ☐ Check                  | if this is an            |
|          | ,                         |                                   |   |                 |                                    | _                        | ded filing               |
|          |                           |                                   |   |                 |                                    |                          | ······9                  |
| Offi     | icial Form                | 106D                              |   |                 |                                    |                          |                          |
| Sc       | hedule C                  | ): Creditors                      | Who Have Claims Se  | ecured          | by Property                        | V                        | 12/15                    |
|          |                           |                                   | Title Have Glanne G   | <del></del>     | <i>5</i>                           | ,                        | ,.0                      |
|          |                           |                                   | two married people are filing together, ut, number the entries, and attach it to t              |                 |                                    |                          |                          |
|          | per (if known).           | taattional rago, till it o        | at, nambor the onthoo, and attach it to t   |                 | no top or any addition             | iai pagoo, milio your na | mo una caco              |
| 1. Do    | any creditors ha          | ave claims secured by             | your property?  |                 |                                    |                          |                          |
|          | ☐ No. Check tl            | his box and submit th             | is form to the court with your other so   | hedules. You    | have nothing else to               | o report on this form.   |                          |
|          | Yes. Fill in a            | all of the information b          | elow  |                 |                                    |                          |                          |
|          |                           | Secured Claims                    |   |                 |                                    |                          |                          |
|          |                           |                                   |   |                 | Column A                           | Column B                 | Column C                 |
|          |                           |                                   | ore than one secured claim, list the credito<br>a particular claim, list the other creditors in |                 | Amount of claim                    | Value of collateral      | Unsecured                |
|          |                           |                                   | al order according to the creditor's name.  |                 | Do not deduct the                  | that supports this       | portion                  |
| 2.1      | Acceptance                | e Now                             | Describe the property that secures the  | claim:          | value of collateral.<br>\$2,835.00 | claim<br>\$500.00        | If any <b>\$2,335.00</b> |
|          | Creditor's Name           |                                   |   |                 | <del></del>                        |                          |                          |
|          |                           |                                   |   |                 |                                    |                          |                          |
|          | Attn: Bankr               |                                   | As of the date you file, the claim is: Che  | ack all that    |                                    |                          |                          |
|          | 5501 Heado                |                                   | apply.  | CK dii liidl    |                                    |                          |                          |
|          | Plano, TX 7               |                                   | Contingent  |                 |                                    |                          |                          |
|          | Number, Street, C         | City, State & Zip Code            | Unliquidated  |                 |                                    |                          |                          |
| Wha      | owes the debt             | t2 Charle and                     | ☐ Disputed  Nature of lien. Check all that apply.   |                 |                                    |                          |                          |
|          |                           | r Check one.                      | _   |                 | 1                                  |                          |                          |
| _        | Debtor 1 only             |                                   | An agreement you made (such as mor car loan)  | rtgage or secur | ea                                 |                          |                          |
|          | Debtor 2 only             |                                   | _   |                 |                                    |                          |                          |
| _        | Debtor 1 and Debt         | tor 2 only<br>debtors and another | ☐ Statutory lien (such as tax lien, mecha ☐ Judgment lien from a lawsuit                        | nic's lien)     |                                    |                          |                          |
| _        | theck if this clain       |                                   | Other (including a right to offset)   |                 |                                    |                          |                          |
|          | community debt            |                                   | Cities (including a right to onset)   |                 |                                    |                          |                          |
|          |                           | 0                                 |   |                 |                                    |                          |                          |
|          |                           | Opened<br>09/17 Last              |   |                 |                                    |                          |                          |
|          |                           | Active                            |   |                 |                                    |                          |                          |
| Date     | debt was incuri           | red <b>9/14/17</b>                | Last 4 digits of account number   | 0621            |                                    |                          |                          |
|          |                           |                                   |   |                 |                                    |                          |                          |
| 2.2      | Ally Financ               | ial                               | Describe the property that secures the  | claim:          | \$10,830.00                        | \$6,000.00               | \$4,830.00               |
|          | Creditor's Name           |                                   | 2009 Ford Expedition 134000 r   | niles           |                                    |                          |                          |
|          |                           | _                                 |   |                 |                                    |                          |                          |
|          | Attn: Bankr<br>Po Box 380 |                                   | As of the date you file, the claim is: Che  | eck all that    |                                    |                          |                          |
|          |                           | on, MN 55438                      | apply.  |                 |                                    |                          |                          |
|          |                           |                                   | Contingent  |                 |                                    |                          |                          |
|          | ivumber, Street, C        | City, State & Zip Code            | ☐ Unliquidated ☐ Disputed   |                 |                                    |                          |                          |
| Who      | owes the debt             | t? Check one.                     | Nature of lien. Check all that apply.   |                 |                                    |                          |                          |
| <b>.</b> | Debtor 1 only             |                                   | ☐ An agreement you made (such as mor  | rtgage or secur | ed                                 |                          |                          |
| _        | Debtor 2 only             |                                   | car loan)   | 3 0             |                                    |                          |                          |
| _        | Debtor 1 and Debt         | tor 2 only                        | ☐ Statutory lien (such as tax lien, mecha   | nic's lien)     |                                    |                          |                          |
| _        |                           | debtors and another               | ☐ Judgment lien from a lawsuit  | - /             |                                    |                          |                          |

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| Debtor 1 John M Walker   |   | ase number (if know) |             |            |
|--|---|----------------------|-------------|------------|
| First Name Middle N  | Name Last Name  |                      |             |            |
| Debtor 2 Kiahini N Dupont First Name Middle N  | Name Last Name  |                      |             |            |
|  |   |                      |             |            |
| ☐ Check if this claim relates to a community debt  | Other (including a right to offset)   |                      |             |            |
| Opened   |   |                      |             |            |
| 02/15 Last   |   |                      |             |            |
| Active   |   |                      |             |            |
| Date debt was incurred 7/24/17   | Last 4 digits of account number 1355  |                      |             |            |
|  |   |                      |             |            |
| 2.3 Burl/chi C/u   | Describe the property that secures the claim:   | \$14,144.00          | \$15,000.00 | \$0.00     |
| Creditor's Name  | 2016 Harley Davidson RD Glide 3000  |                      |             |            |
|  | miles<br>NADA   |                      |             |            |
| 5004 W 004 O4  | As of the date you file, the claim is: Check all that   |                      |             |            |
| 5601 W 26th St   | apply.  |                      |             |            |
| Cicero, IL 60605   | Contingent  |                      |             |            |
| Number, Street, City, State & Zip Code   | ☐ Unliquidated  |                      |             |            |
| Who owes the debt? Check one.  | ☐ Disputed  Nature of lien. Check all that apply.   |                      |             |            |
| _  | _   | - 4                  |             |            |
| Debtor 1 only  | An agreement you made (such as mortgage or secur<br>car loan)   | ea                   |             |            |
| Debtor 2 only  | _   |                      |             |            |
| Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic's lien)  |                      |             |            |
| At least one of the debtors and another  | Judgment lien from a lawsuit  |                      |             |            |
| ☐ Check if this claim relates to a community debt  | Other (including a right to offset)   |                      |             |            |
|  |   |                      |             |            |
| Opened   |   |                      |             |            |
| • • • • • • • • • • • • • • • • • • •  |   |                      |             |            |
| 6/21/16  |   |                      |             |            |
| 6/21/16<br>Last Active   | Last 4 digits of account number 7272  |                      |             |            |
| 6/21/16  | Last 4 digits of account number 7272  |                      |             |            |
| Date debt was incurred 9/30/17   | Last 4 digits of account number 7272  |                      |             |            |
| Date debt was incurred 9/30/17  Harley Davidson Financial  | Last 4 digits of account number 7272  Describe the property that secures the claim:   | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred 9/30/17  Harley Davidson  |   | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred 9/30/17  2.4 Harley Davidson Financial Creditor's Name  | Describe the property that secures the claim:   | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy   | Describe the property that secures the claim:   | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred 9/30/17  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred 9/30/17  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent  | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred 9/30/17  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated   | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred 9/30/17  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  | \$21,290.00          | \$20,000.00 | \$1,290.00 |
| Date debt was incurred 9/30/17  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secure car loan)   | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred    2.4   Harley Davidson Financial   Creditor's Name  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien)   | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit  | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred    2.4   Harley Davidson Financial   Creditor's Name  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien)   | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit  | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit  | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 05/16 Last  | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit  | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 05/16 Last Active   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)                                       | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 05/16 Last Active   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)                                       | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred  2.4 Harley Davidson Financial Creditor's Name  Attention: Bankruptcy Po Box 22048 Carson City, NV 89721  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 05/16 Last Active   | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)                                       | ·                    | \$20,000.00 | \$1,290.00 |
| Date debt was incurred    Comparison of Comp | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)                                       | ed                   |             | \$1,290.00 |
| Date debt was incurred    Comparison of Comp | Describe the property that secures the claim:  2016 Harley Davidson Rd Glide  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secur car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number  8030 | ·                    |             | \$1,290.00 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Official Form 106D

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| Debtor 1 | John M Walker    |             |           | Case number (if know) |  |
|----------|------------------|-------------|-----------|-----------------------|--|
| •        | First Name       | Middle Name | Last Name |                       |  |
| Debtor 2 | Kiahini N Dupont |             |           |                       |  |
| •        | First Name       | Middle Name | Last Name |                       |  |

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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|                           |  |  | Documer   | nt Page   | 23 of 8                      | 33   |   |                                    |
|---------------------------|--|--|---|---|------------------------------|--|---|------------------------------------|
| Fil                       | l in this inforr   | mation to identify your ca   |   |   |                              |  |   |                                    |
| DΔ                        | btor 1   | John M Walker  |   |   |                              |  |   |                                    |
| DC                        | DIOI I   | First Name   | Middle Name   | Last Nam  | Э                            |  |   |                                    |
| De                        | btor 2   | Kiahini N Dupont   |   |   |                              |  |   |                                    |
| (Sp                       | ouse if, filing)   | First Name   | Middle Name   | Last Nam  | Э                            |  |   |                                    |
| Un                        | ited States Ba   | inkruptcy Court for the:   | NORTHERN DISTRICT   | OF ILLINOIS   |                              |  |   |                                    |
| _                         |  | _  |   |   |                              |  |   |                                    |
|                           | se number _<br>nown)   |  |   |   |                              |  | ☐ Check                                       | if this is an                      |
| `                         | ,  |  |   |   |                              |  | _   | ed filing                          |
|                           |  |  |   |   |                              |  |   | -                                  |
|                           | ficial Forn  |  |   |   |                              |  |   |                                    |
|                           |  | F. Creditors Wh  |   |   |                              |  |   | 12/15                              |
| Sch<br>Sch<br>eft.<br>nam | edule G: Execu<br>edule D: Credit<br>Attach the Cor<br>ne and case nui | tracts or unexpired leases the<br>story Contracts and Unexpire<br>tors Who Have Claims Secur<br>tinuation Page to this page.<br>mber (if known).                     | d Leases (Official Form 10<br>ed by Property. If more spa<br>If you have no information               | 16G). Do not inclu<br>ace is needed, co                         | ide any cre<br>py the Part   | editors with partially s<br>t you need, fill it out, i | ecured claims that a<br>number the entries in | re listed in note the boxes on the |
|                           |  | ors have priority unsecured  |   |   |                              |  |   |                                    |
| •                         | □ No. Go to F  | • •  | iainis against you:   |   |                              |  |   |                                    |
|                           | Yes.   | uit 2.   |   |   |                              |  |   |                                    |
| 2.                        | identify what ty<br>possible, list th<br>Part 1. If more               | r priority unsecured claims.  pe of claim it is. If a claim has  e claims in alphabetical order a  than one creditor holds a parti  ation of each type of claim, see | poth priority and nonpriority a<br>according to the creditor's na<br>cular claim, list the other cred | amounts, list that o<br>ame. If you have m<br>ditors in Part 3. | claim here a<br>nore than tw | nd show both priority a                                | nd nonpriority amount                         | ts. As much as                     |
|                           | ٦.,  |  |   |   |                              | <b>A.F. </b>   | amount  | amount                             |
| 2.1                       |  | I Revenue Service reditor's Name   | Last 4 digits of  | account number  | 9007                         | \$15,000.00  | \$15,000.00                                   | \$0.00                             |
|                           | PO Box   |  | When was the d  | lebt incurred?  |                              |  |   |                                    |
|                           |  | elphia, PA 19101-7346  |   |   |                              |  |   |                                    |
|                           |  | Street City State Zlp Code d the debt? Check one.  | <u></u>   | ou file, the claim  | is: Check a                  | all that apply   |   |                                    |
|                           | _  |  | ☐ Contingent  |   |                              |  |   |                                    |
|                           | ■ Debtor 1 o   | only   | ☐ Unliquidated  |   |                              |  |   |                                    |
|                           | Debtor 2 o   | only   | ☐ Disputed  |   |                              |  |   |                                    |
|                           | Debtor 1 a   | and Debtor 2 only  | 71  | TY unsecured cla  | im:                          |  |   |                                    |
|                           | At least or  | ne of the debtors and another  | ☐ Domestic sup  | port obligations  |                              |  |   |                                    |
|                           | ☐ Check if t   | this claim is for a communit   | / debt Taxes and ce   | ertain other debts y  | ou owe the                   | government   |   |                                    |
|                           | Is the claim   | subject to offset?   | ☐ Claims for de   | ath or personal in  | ury while yo                 | ou were intoxicated                                    |   |                                    |
|                           | ■ No   |  | Other. Specif   | y   |                              |  |   |                                    |
|                           | ☐ Yes  |  |   | 2014-prese  | nt                           |  |   |                                    |
| Pa                        | rt 2: List A   | II of Your NONPRIORITY   | Unsecured Claims  |   |                              |  |   |                                    |
|                           |  | ors have nonpriority unsecu  |   |   |                              |  |   |                                    |
| •.                        |  | ve nothing to report in this part  |   | rt with your other:   | schedules.                   |  |   |                                    |
|                           | Yes.   | S April 10 S Francis   |   | , <del>.</del> .  |                              |  |   |                                    |
|                           |  |  |   |   |                              |  |   |                                    |
| 4.                        | unsecured clai   | r nonpriority unsecured clair<br>m, list the creditor separately for<br>tor holds a particular claim, list   | or each claim. For each clain   | n listed, identify wh   | nat type of c                | laim it is. Do not list cla                            | ims already included                          | in Part 1. If more                 |

Total claim

Part 2.

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| Debt | or 2 Kiahini N Dupont   | Case number (if know)   |            |  |  |  |
|------|---|---|------------|--|--|--|
| 4.1  | Advance America Romeoville Nonpriority Creditor's Name                                      | Last 4 digits of account number   | \$500.00   |  |  |  |
|      | 482 N Weber Rd<br>Romeoville, IL 60446  | When was the debt incurred?   |            |  |  |  |
|      | Number Street City State Zlp Code  Who incurred the debt? Check one.                        | As of the date you file, the claim is: Check all that apply   |            |  |  |  |
|      | ☐ Debtor 1 only   | ☐ Contingent  |            |  |  |  |
|      | ☐ Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |
|      | ■ Debtor 1 and Debtor 2 only  | □ Disputed  |            |  |  |  |
|      | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|      | ☐ Check if this claim is for a community  | ☐ Student loans   |            |  |  |  |
|      | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
|      | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |            |  |  |  |
|      | Yes   | Other. Specify  |            |  |  |  |
| 4.2  | Afni  | Last 4 digits of account number 3149  | \$245.00   |  |  |  |
|      | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3097                                    | When was the debt incurred? Opened 08/16  |            |  |  |  |
|      | Bloomington, IL 61702  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |            |  |  |  |
|      | ■ Debtor 1 only   | ☐ Contingent  |            |  |  |  |
|      | ☐ Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |
|      | Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |  |  |  |
|      | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|      | ☐ Check if this claim is for a community  | ☐ Student loans   |            |  |  |  |
|      | debt Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |            |  |  |  |
|      | No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |  |  |  |
|      | □Yes  | ■ Other. Specify Collection Attorney Comcast  |            |  |  |  |
| 4.3  | AIU   | Last 4 digits of account number   | \$1,000.00 |  |  |  |
|      | Nonpriority Creditor's Name Student Accounts 231 N Martindale Rd                            | When was the debt incurred?   |            |  |  |  |
|      | Schaumburg, IL 60173  Number Street City State Zlp Code                                     | As of the date you file, the claim is: Check all that apply   |            |  |  |  |
|      | Who incurred the debt? Check one.   |   |            |  |  |  |
|      | Debtor 1 only   | ☐ Contingent  |            |  |  |  |
|      | Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |
|      | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |  |  |  |
|      | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|      | ☐ Check if this claim is for a community debt   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not           |            |  |  |  |
|      | Is the claim subject to offset?  ■ No   | report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts            |            |  |  |  |
|      | ■ No □ Yes  |   |            |  |  |  |
|      | ⊔ res   | ■ Other. Specify Tuition  |            |  |  |  |

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| or 2 Kiahini N Dupont  |  | Case number (if know)                         |            |
|--|--|---|------------|
|  |  | mult  | ***        |
| AT & T Mobility  | Last 4 digits of account number                              | accounts                                      | \$0.00     |
| Nonpriority Creditor's Name Attn: Karen Cavagnaro, Paralegal One AT&T Way, Room 3A104 Bedminster, NJ 07921 | When was the debt incurred?                                  |   |            |
| Number Street City State ZIp Code  | As of the date you file, the claim                           | is: Check all that apply                      |            |
| Who incurred the debt? Check one.  |  | ,   |            |
| Debtor 1 only  | ☐ Contingent   |   |            |
| Debtor 2 only  | ☐ Unliquidated   |   |            |
| ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |
| ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |
| ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |
| debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not  |            |
| ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |            |
| Yes  | ■ Other. Specify Utility/Phon                                | ne  |            |
| Atg Credit LIc   | Last 4 digits of account number                              | 8937  | \$6,251.00 |
| Nonpriority Creditor's Name 1700 W Cortland St Ste 2   | When was the debt incurred?                                  | Opened 06/16                                  |            |
| Chicago, IL 60622  Number Street City State Zlp Code  Who incurred the debt? Check one.                    | As of the date you file, the claim                           | is: Check all that apply                      |            |
| ■ Debtor 1 only  | ☐ Contingent   |   |            |
| Debtor 2 only  | ☐ Unliquidated   |   |            |
| Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |
| ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |
| ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |
| debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not  |            |
| ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |            |
| Yes  | Other. Specify Collection                                    | Attorney Aiu - Online                         |            |
| Bank of America  | Last 4 digits of account number                              |   | \$500.00   |
| Nonpriority Creditor's Name Loss/Recovery  | When was the debt incurred?                                  |   |            |
| 800 Market St<br>Saint Louis, MO 63101   |  |   |            |
| Number Street City State Zlp Code  | As of the date you file, the claim                           | is: Check all that apply                      |            |
| Who incurred the debt? Check one.  |  |   |            |
| Debtor 1 only  | ☐ Contingent   |   |            |
| Debtor 2 only  | ☐ Unliquidated   |   |            |
| ■ Debtor 1 and Debtor 2 only   | Disputed   |   |            |
| ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                      |            |
| ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |
| debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |
| ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |            |
| ☐ Yes  | Other. Specify   |   |            |
|  |  |   |            |

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| 2 Kiahini N Dupont   | Case number (if know)   |   |          |  |  |
|--|---|---|----------|--|--|
| Best Buy   | Last 4 digits of account number   | \$1,000.00                                    |          |  |  |
| Nonpriority Creditor's Name 7601 Penn Avenue South Minneapolis, MN 55423 | When was the debt incurred?   |   |          |  |  |
| Number Street City State Zlp Code  Who incurred the debt? Check one.     | As of the date you file, the claim  |   |          |  |  |
| ☐ Debtor 1 only  | ☐ Contingent  |   |          |  |  |
| ☐ Debtor 2 only  | ☐ Unliquidated  |   |          |  |  |
| ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |          |  |  |
| ☐ At least one of the debtors and another                                | Type of NONPRIORITY unsecure  | d claim:                                      |          |  |  |
| ☐ Check if this claim is for a community                                 | ☐ Student loans   |   |          |  |  |
| debt Is the claim subject to offset?                                     | Obligations arising out of a separeport as priority claims                                      | aration agreement or divorce that you did not |          |  |  |
| ■ No   | Debts to pension or profit-sharing  | ng plans, and other similar debts             |          |  |  |
| ☐ Yes  | Other Specify   |   |          |  |  |
| Burl/chi C/u Nonpriority Creditor's Name                                 | Last 4 digits of account number   | 0071  | \$607.00 |  |  |
| 5601 W 26th St<br>Cicero, IL 60605                                       | When was the debt incurred?   | Opened 7/14/17 Last Active 9/08/17            |          |  |  |
| Number Street City State Zlp Code Who incurred the debt? Check one.      | As of the date you file, the claim  | is: Check all that apply                      |          |  |  |
| Debtor 1 only  | ☐ Contingent  |   |          |  |  |
| ☐ Debtor 2 only  | ☐ Unliquidated  |   |          |  |  |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |          |  |  |
| ☐ At least one of the debtors and another                                | Type of NONPRIORITY unsecure  | d claim:                                      |          |  |  |
| ☐ Check if this claim is for a community                                 | ☐ Student loans   |   |          |  |  |
| debt Is the claim subject to offset?                                     | Obligations arising out of a separeport as priority claims                                      | aration agreement or divorce that you did not |          |  |  |
| No   | Debts to pension or profit-sharir   | ng plans, and other similar debts             |          |  |  |
| Yes  | ■ Other. Specify  |   |          |  |  |
| Capital One  | Last 4 digits of account number   | 7249  | \$441.00 |  |  |
| Nonpriority Creditor's Name  |   |   | Ψ++1.00  |  |  |
| Attn: General<br>Correspondence/Bankruptcy<br>Po Box 30285               | When was the debt incurred?   | Opened 09/14 Last Active 9/25/17              |          |  |  |
| Salt Lake City, UT 84130  Number Street City State Zlp Code              | As of the date you file, the claim  | is: Check all that apply                      |          |  |  |
| Who incurred the debt? Check one.  | _   |   |          |  |  |
| Debtor 1 only  | Contingent  |   |          |  |  |
| Debtor 2 only  | Unliquidated  |   |          |  |  |
| Debtor 1 and Debtor 2 only   | Disputed  |   |          |  |  |
| At least one of the debtors and another                                  | Type of NONPRIORITY unsecured claim:  |   |          |  |  |
| Check if this claim is for a community debt                              | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not |   |          |  |  |
| Is the claim subject to offset?  | report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts  |   |          |  |  |
| □Yes   | ■ Other. Specify Credit Card  |   |          |  |  |
|  |   |   |          |  |  |

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| Debto   | r 2 Kiahini N Dupont   |  | Case number (if know)                         |             |  |  |
|---|--|--|---|-------------|--|--|
| 4.1   | Capital One  | Last 4 digits of account number  | 8533  | \$215.00    |  |  |
|   | Nonpriority Creditor's Name Attn: General Correspondence/Bankruptcy Po Box 30285               | When was the debt incurred?  | Opened 07/17 Last Active 10/02/17             |             |  |  |
|   | Salt Lake City, UT 84130  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim   | is: Check all that apply                      |             |  |  |
|   | ☐ Debtor 1 only ☐ Debtor 2 only  | ☐ Contingent ☐ Unliquidated  |   |             |  |  |
|   | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                         | ☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans                   | d claim:                                      |             |  |  |
|   | ☐ Check if this claim is for a community debt Is the claim subject to offset?                  | ☐ Obligations arising out of a separeport as priority claims                 |   |             |  |  |
|   | ■ No<br>□ Yes  | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card             |   |             |  |  |
| 4.1   | Cardworks/CW Nexus   | Last 4 digits of account number  | 8685  | \$588.00    |  |  |
| 1   | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9201                                       | When was the debt incurred?  | Opened 08/15 Last Active 9/29/17              | <del></del> |  |  |
|   | Old Bethpage, NY 11804  Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim   | is: Check all that apply                      |             |  |  |
|   | ☐ Debtor 1 only  | ☐ Contingent   |   |             |  |  |
|   | Debtor 2 only  | ☐ Unliquidated   |   |             |  |  |
|   | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                         | ☐ Disputed  Type of NONPRIORITY unsecured                                    | d claim:                                      |             |  |  |
|   | ☐ Check if this claim is for a community debt Is the claim subject to offset?                  | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |             |  |  |
|   | ■ No   | Debts to pension or profit-sharing   | g plans, and other similar debts              |             |  |  |
|   | Yes  | Other. Specify Credit Card   | <u> </u>                                      |             |  |  |
| 4.1   | Cavalry Portfolio Services  Nonpriority Creditor's Name  | Last 4 digits of account number  | 3481  | \$1,321.00  |  |  |
|   | Attn: Bankruptcy Department<br>500 Summit Lake Ste 400<br>Valhalla, NY 10595                   | When was the debt incurred?  | Opened 08/16                                  |             |  |  |
|   | Number Street City State Zlp Code  Who incurred the debt? Check one.                           | As of the date you file, the claim   | s: Check all that apply                       |             |  |  |
|   | ■ Debtor 1 only  | ☐ Contingent   |   |             |  |  |
|   | ☐ Debtor 2 only  | ☐ Unliquidated   |   |             |  |  |
|   | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |  |  |
|   | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured  |   |             |  |  |
| ☐ Check if this claim is for a communi<br>debt<br>Is the claim subject to offset? |  | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims |   |             |  |  |
|   | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts          |   |             |  |  |
|   | Yes  | ·  | Attorney Synchrony Bank                       |             |  |  |
|   |  | · · ·  |   |             |  |  |

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| or 2 Kiahini N Dupont  | Case number (if know)  |          |
|--|--|----------|
| Certegy Check Services   | Last 4 digits of account number  | \$500.00 |
| Nonpriority Creditor's Name  | When was the debt incurred?  | · .      |
| PO Box 30046<br>Tampa, FL 33630                                      | when was the debt incurred?  |          |
| Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply                                    |          |
| Who incurred the debt? Check one.                                    | •  |          |
| ☐ Debtor 1 only  | ☐ Contingent   |          |
| Debtor 2 only  | ☐ Unliquidated   |          |
| ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |          |
| ☐ At least one of the debtors and anothe                             |  |          |
| _  | Chadant lane   |          |
| ☐ Check if this claim is for a commun debt                           | ☐ Obligations arising out of a separation agreement or divorce that you did not                |          |
| Is the claim subject to offset?                                      | report as priority claims  |          |
| No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                    |          |
| ☐ Yes  | Other. Specify   |          |
| Chase  | Lock A digita of account growther  | \$500.00 |
| Nonpriority Creditor's Name  | Last 4 digits of account number  | Ψ500.00  |
| 201 N. Walnut St/de1-1027  | When was the debt incurred?  |          |
| Wilmington, DE 19801   |  |          |
| Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply                                    |          |
| _  | _  |          |
| ☐ Debtor 1 only  | ☐ Contingent   |          |
| Debtor 2 only  | ☐ Unliquidated   |          |
| Debtor 1 and Debtor 2 only   | ☐ Disputed   |          |
| At least one of the debtors and anothe                               |  |          |
| ☐ Check if this claim is for a commun                                | •  |          |
| debt   | Obligations arising out of a separation agreement or divorce that you did not                  |          |
| Is the claim subject to offset?                                      | report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts |          |
| No   |  |          |
| ☐ Yes  | Other. Specify   |          |
| ChexSystems  | Last 4 digits of account number  | \$0.00   |
| Nonpriority Creditor's Name  | <del></del>  |          |
| 7805 Hudson Rd, Ste 100<br>Saint Paul, MN 55125                      | When was the debt incurred?  |          |
| Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply                                    |          |
| Who incurred the debt? Check one.                                    |  |          |
| ☐ Debtor 1 only  | ☐ Contingent   |          |
| ☐ Debtor 2 only  | ☐ Unliquidated   |          |
| ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |          |
| ☐ At least one of the debtors and anothe                             |  |          |
| ☐ Check if this claim is for a commun                                | Charles to Long  |          |
| debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                |          |
| Is the claim subject to offset?                                      | report as priority claims  |          |
| ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                    |          |
| Yes  | Other. Specify   |          |
|  |  |          |

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Debtor 2 Kiahini N Dupont Case number (if know) 4.1 \$800.00 Comcast Last 4 digits of account number 6 Nonpriority Creditor's Name **Corporate Office Headquarters** When was the debt incurred? 1701 John F Kennedy Boulevard Philadelphia, PA 19103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacktriangledown Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Cable 4.1 ComEd \$800.00 Last 4 digits of account number Nonpriority Creditor's Name Attn Bankruptcy When was the debt incurred? PO Box 805379 Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Comenity Bank/Ashley Stewart 2271 Last 4 digits of account number \$748.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/16 Last Active Po Box 182125 When was the debt incurred? 9/27/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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| Debtor | 2 Kiahini N Dupont  |   | Case number (if know)                        |            |
|--------|---|---|--|------------|
| 4.1    | Comenity Bank/Carsons   | Last 4 digits of account number   | 1007   | \$1,551.00 |
|        | Nonpriority Creditor's Name Po Box 182125 Columbus, OH 43218                  | When was the debt incurred?   | Opened 02/15 Last Active 8/18/17             |            |
|        | Number Street City State Zlp Code  Who incurred the debt? Check one.          | As of the date you file, the claim i  | s: Check all that apply                      |            |
|        | Debtor 1 only   | ☐ Contingent  |  |            |
|        | ■ Debtor 2 only   | ☐ Unliquidated  |  |            |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|        | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured   | d claim:                                     |            |
|        | ☐ Check if this claim is for a community                                      | ☐ Student loans   |  |            |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                  | ration agreement or divorce that you did not |            |
|        | No  | Debts to pension or profit-sharing  | g plans, and other similar debts             |            |
|        | Yes   | Other. Specify Charge Acc   | count  |            |
| 4.2    | Comenity Bank/Gander Mountain  Nonpriority Creditor's Name                    | Last 4 digits of account number   | 4604   | \$206.00   |
|        | Po Box 182125<br>Columbus, OH 43218   | When was the debt incurred?   | Opened 06/15 Last Active 7/21/17             |            |
|        | Number Street City State ZIp Code  Who incurred the debt? Check one.          | As of the date you file, the claim i  | s: Check all that apply                      |            |
|        | ☐ Debtor 1 only   | ☐ Contingent  |  |            |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |
|        | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|        | $\square$ At least one of the debtors and another                             | Type of NONPRIORITY unsecured   | d claim:                                     |            |
|        | ☐ Check if this claim is for a community                                      | ☐ Student loans   |  |            |
|        | debt Is the claim subject to offset? —  | report as priority claims   | ration agreement or divorce that you did not |            |
|        | No  | Debts to pension or profit-sharin   |  |            |
|        | Yes   | Other. Specify Charge Account   |  |            |
| 4.2    | Comenity Bank/Victoria Secret  Nonpriority Creditor's Name                    | Last 4 digits of account number   | 3773   | \$598.00   |
|        | Attn: Bankruptcy<br>Po Box 182125<br>Columbus, OH 43218                       | When was the debt incurred?   | Opened 01/15 Last Active 8/23/17             |            |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.           | As of the date you file, the claim i  | s: Check all that apply                      |            |
|        | ☐ Debtor 1 only   | ☐ Contingent  |  |            |
|        | Debtor 2 only   | ☐ Unliquidated  |  |            |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|        | $\square$ At least one of the debtors and another                             | Type of NONPRIORITY unsecured   | d claim:                                     |            |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not |            |
|        | ■ No  | Debts to pension or profit-sharin   | g plans, and other similar debts             |            |
|        | ☐ Yes   | ■ Other Specify Charge Acc  | count  |            |

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| Debtor<br>Debtor | 1 John M Walker<br>2 Kiahini N Dupont   |  | Case number (if know)                         |          |
|------------------|---|--|---|----------|
| 4.2              | Comenity Bkl/Ulta   | Last 4 digits of account number          | 8831  | \$399.00 |
|                  | Nonpriority Creditor's Name Po Box 182125 Columbus, OH 18215                  | When was the debt incurred?              | Opened 08/16 Last Active 10/12/17             |          |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.           | As of the date you file, the claim       | is: Check all that apply                      |          |
|                  | ☐ Debtor 1 only ☐ Debtor 2 only   | ☐ Contingent☐ Unliquidated               |   |          |
|                  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another        | ☐ Disputed  Type of NONPRIORITY unsecure | d claim:                                      |          |
|                  | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Student loans                            | aration agreement or divorce that you did not |          |
|                  | No  | Debts to pension or profit-sharin        | ng plans, and other similar debts             |          |
|                  | ☐ Yes   | ■ Other. Specify Charge Acc              |   |          |
| 4.2              | Comenitybank/New York Nonpriority Creditor's Name                             | Last 4 digits of account number          | 1329  | \$797.00 |
|                  | AttN: Bankruptcy Po Box 182125 Columbus, OH 43218                             | When was the debt incurred?              | Opened 10/16 Last Active 9/11/17              |          |
|                  | Number Street City State Zlp Code  Who incurred the debt? Check one.          | As of the date you file, the claim       | is: Check all that apply                      |          |
|                  | ☐ Debtor 1 only   | ☐ Contingent                             |   |          |
|                  | ■ Debtor 2 only   | ☐ Unliquidated                           |   |          |
|                  | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed                               |   |          |
|                  | $\square$ At least one of the debtors and another                             | Type of NONPRIORITY unsecured            | d claim:                                      |          |
|                  | ☐ Check if this claim is for a community debt                                 | 0 0 1                                    | aration agreement or divorce that you did not |          |
|                  | Is the claim subject to offset?   | report as priority claims                |   |          |
|                  | ■ No  | ☐ Debts to pension or profit-sharin      |   |          |
|                  | Yes   | Other. Specify Charge Account            |   |          |
| 4.2              | Comenitybank/venus Nonpriority Creditor's Name                                | Last 4 digits of account number          | 1712  | \$541.00 |
|                  | Comenity Bank Po Box 182125 Columbus, OH 43218                                | When was the debt incurred?              | Opened 12/16 Last Active 9/29/17              |          |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.           | As of the date you file, the claim       | is: Check all that apply                      |          |
|                  | ☐ Debtor 1 only   | ☐ Contingent                             |   |          |
|                  | ■ Debtor 2 only   | ☐ Unliquidated                           |   |          |
|                  | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed                               |   |          |
|                  | $\square$ At least one of the debtors and another                             | Type of NONPRIORITY unsecured            |   |          |
|                  | ☐ Check if this claim is for a community debt                                 |  | aration agreement or divorce that you did not |          |
|                  | Is the claim subject to offset?   | report as priority claims                |   |          |
|                  | ■ No  | Debts to pension or profit-sharing       |   |          |
|                  | Yes   | ■ Other. Specify Charge Acc              | count   |          |

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| Debtor<br>Debtor | <ul><li>1 John M Walker</li><li>2 Kiahini N Dupont</li></ul> | Document 1 age 3   | Case number (if know)                        |            |
|------------------|--|--|--|------------|
|                  | - Mainin N Dapont  |  |  |            |
| 4.2<br>5         | Continental Finance Co                                       | Last 4 digits of account number                              | 1556   | \$775.00   |
|                  | Nonpriority Creditor's Name                                  |  | On an ad 00/45   Last Astina                 |            |
|                  | Cfc<br>121 Continental Dr #108                               | When was the debt incurred?                                  | Opened 08/15 Last Active 7/07/17             |            |
|                  | Newark, DE 19713   |  |  |            |
|                  | Number Street City State Zlp Code                            | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|                  | Who incurred the debt? Check one.                            |  |  |            |
|                  | Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ■ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only                                 | ☐ Disputed   |  |            |
|                  | ☐ At least one of the debtors and another                    | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community                     | ☐ Student loans  |  |            |
|                  | debt   |  | ration agreement or divorce that you did not |            |
|                  | Is the claim subject to offset?                              | report as priority claims  Debts to pension or profit-sharin | a plane, and other similar debte             |            |
|                  | ■ No   | ·  | ,  |            |
|                  | Yes  | Other. Specify Credit Card                                   | <u> </u>                                     |            |
|                  |  |  |  |            |
| 4.2<br>6         | Convergent Outsourcing, Inc                                  | Last 4 digits of account number                              | 1868   | \$2,773.00 |
|                  | Nonpriority Creditor's Name Po Box 9004                      | When was the debt incurred?                                  | Opened 02/47                                 |            |
|                  | Renton, WA 98057   | when was the dept incurred?                                  | Opened 02/17                                 |            |
|                  | Number Street City State Zlp Code                            | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|                  | Who incurred the debt? Check one.                            |  |  |            |
|                  | Debtor 1 only  | ☐ Contingent   |  |            |
|                  | Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only                                 | ☐ Disputed   |  |            |
|                  | ☐ At least one of the debtors and another                    | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community                     | ☐ Student loans  |  |            |
|                  | debt   |  | ration agreement or divorce that you did not |            |
|                  | Is the claim subject to offset?                              | report as priority claims                                    |  |            |
|                  | No   | Debts to pension or profit-sharing                           |  |            |
|                  | ☐ Yes  | Other. Specify Collection                                    | Attorney T-Mobile Usa                        |            |
|                  |  |  |  |            |
| 4.2<br>7         | Credit Management, LP  Nonpriority Creditor's Name           | Last 4 digits of account number                              | 3362   | \$1,156.00 |
|                  | The Offices of Credit Management,                            | When was the debt incurred?                                  | Opened 05/17                                 |            |
|                  | LP   |  |  |            |
|                  | Po Box 118288  |  |  |            |
|                  | Carrolton, TX 75011  Number Street City State Zlp Code       | As of the date you file, the claim i                         | is: Check all that apply                     |            |
|                  | Who incurred the debt? Check one.                            | As of the date you me, the dam's                             | S. Oncok all that apply                      |            |
|                  | ☐ Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ■ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | Debtor 1 and Debtor 2 only                                   | ☐ Disputed   |  |            |
|                  |  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|                  | At least one of the debtors and another                      | Student loans  |  |            |
|                  | ☐ Check if this claim is for a community debt                | _  | ration agreement or divorce that you did not |            |
|                  | Is the claim subject to offset?                              | report as priority claims                                    | nation agreement of divolce that you did not |            |
|                  | ■ No   | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts             |            |
|                  | ☐ Yes  | ■ Other. Specify Collection                                  | Attorney Comcast Cable                       |            |
|                  |  |  |  |            |

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| Debto: | r 1 John M Walker<br>r 2 Kiahini N Dupont                           |  | Case number (if know)   |            |  |
|--------|---|--|---|------------|--|
| 4.2    | Credit One Bank Na  | Last 4 digits of account number                              | 5492  | \$1,311.00 |  |
|        | Nonpriority Creditor's Name Po Box 98873 Las Vegas, NV 89193        | When was the debt incurred?                                  | Opened 10/14 Last Active 9/24/17                                  |            |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply  |            |  |
|        | ☐ Debtor 1 only   | ☐ Contingent   |   |            |  |
|        | ■ Debtor 2 only   | ☐ Unliquidated   |   |            |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |  |
|        | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured                                | d claim:  |            |  |
|        | ☐ Check if this claim is for a community                            | ☐ Student loans  |   |            |  |
|        | debt<br>Is the claim subject to offset?                             | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not                     |            |  |
|        | No  | Debts to pension or profit-sharing                           | g plans, and other similar debts                                  |            |  |
|        | Yes   | Other. Specify Credit Card                                   | <u> </u>  |            |  |
| 4.2    | Credit One Bank Na Nonpriority Creditor's Name                      | Last 4 digits of account number                              | 5712  | \$733.00   |  |
|        | Po Box 98873<br>Las Vegas, NV 89193                                 | When was the debt incurred?                                  | Opened 04/16 Last Active 9/19/17                                  |            |  |
|        | Number Street City State Zlp Code                                   | As of the date you file, the claim                           |   |            |  |
|        | Who incurred the debt? Check one.                                   |  |   |            |  |
|        | Debtor 1 only   | ☐ Contingent   |   |            |  |
|        | ■ Debtor 2 only   | ☐ Unliquidated   |   |            |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |  |
|        | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured                                | d claim:  |            |  |
|        | ☐ Check if this claim is for a community                            | ☐ Student loans  |   |            |  |
|        | debt Is the claim subject to offset?                                | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not                     |            |  |
|        | ■ No  | Debts to pension or profit-sharing                           | Debts to pension or profit-sharing plans, and other similar debts |            |  |
|        | Yes   | Other. Specify Credit Card                                   |   |            |  |
| 4.3    | Credit One Bank Na Nonpriority Creditor's Name                      | Last 4 digits of account number                              | 3028  | \$491.00   |  |
|        | Po Box 98873<br>Las Vegas, NV 89193                                 | When was the debt incurred?                                  | Opened 09/16 Last Active 5/28/17                                  |            |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply  |            |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |   |            |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |   |            |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |  |
|        | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecure                                 | d claim:  |            |  |
|        | ☐ Check if this claim is for a community                            | ☐ Student loans  |   |            |  |
|        | debt  | Obligations arising out of a sepa                            | aration agreement or divorce that you did not                     |            |  |
|        | Is the claim subject to offset?                                     | report as priority claims                                    |   |            |  |
|        | ■ No  | Debts to pension or profit-sharing                           |   |            |  |
|        | ☐ Yes   | Other. Specify Credit Card                                   | <u> </u>  |            |  |

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| Debtor<br>Debtor | 1 John M Walker<br>2 Kiahini N Dupont  |  | Case number (if know)                        |            |
|------------------|--|--|--|------------|
| 4.3<br>1         | Diversified Consultants, Inc.  | Last 4 digits of account number                              | 9814   | \$1,016.00 |
|                  | Nonpriority Creditor's Name Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255               | When was the debt incurred?                                  | Opened 07/17                                 |            |
|                  | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim                           | s: Check all that apply                      |            |
|                  | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|                  | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community   | ☐ Student loans  |  |            |
|                  | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|                  | ■ No   | ☐ Debts to pension or profit-sharing                         | g plans, and other similar debts             |            |
|                  | Yes  | Other. Specify Collection                                    | Attorney Att U-Verse                         |            |
| 4.3              | Fifth Third Bank - Chicago   | Last 4 digits of account number                              |  | \$500.00   |
|                  | Nonpriority Creditor's Name  222 S Riverside Plaza, 33rd Flr  Chicago, IL 60606  When was the debt incurred? |  |  |            |
|                  | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim                           | s: Check all that apply                      |            |
|                  | ☐ Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|                  | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community   | ☐ Student loans  |  |            |
|                  | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not |            |
|                  | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |
|                  | Yes  | Other. Specify   |  |            |
| 4.3              | Fingerhut Nonpriority Creditor's Name  | Last 4 digits of account number                              | 0757   | \$549.00   |
|                  | Bankruptcy Dept  |  | Opened 03/16 Last Active                     |            |
|                  | 6250 Ridgewood Rd<br>Saint Cloud, MN 56303   | When was the debt incurred?                                  | 10/09/17                                     |            |
|                  | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim                           | s: Check all that apply                      |            |
|                  | ☐ Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ■ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|                  | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  ☐ Student loans        |  |            |
|                  | ☐ Check if this claim is for a community   |  |  |            |
|                  | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not |            |
|                  | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |
|                  | Yes  | ■ Other. Specify Charge Acc                                  | count  |            |
|                  |  |  |  |            |

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|     | r 2 Kiahini N Dupont   |  | Case number (if know)                        |            |
|-----|--|--|--|------------|
| 4.3 | First Premier Bank   | Last 4 digits of account number                              | 7253   | \$1,017.00 |
|     | Nonpriority Creditor's Name  | _  |  | ·          |
|     | 601 S Minnesota Ave<br>Sioux Falls, SD 57104                           | When was the debt incurred?                                  | Opened 02/16 Last Active 7/19/17             |            |
|     | Number Street City State ZIp Code                                      | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|     | Who incurred the debt? Check one.                                      |  |  |            |
|     | Debtor 1 only  | ☐ Contingent   |  |            |
|     | ■ Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | $\square$ At least one of the debtors and another                      | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|     | Check if this claim is for a community                                 | Student loans  |  |            |
|     | debt<br>Is the claim subject to offset?                                | report as priority claims                                    | ration agreement or divorce that you did not |            |
|     | ■ No   | Debts to pension or profit-sharin                            | <b>01</b> ,                                  |            |
|     | Yes  | Other. Specify Credit Card                                   | <u> </u>                                     |            |
| 4.3 | First Premier Bank   | Last 4 digits of account number                              | 8236   | \$980.00   |
| 5   | Nonpriority Creditor's Name  |  |  | 4000.00    |
|     | 601 S Minnesota Ave<br>Sioux Falls, SD 57104                           | When was the debt incurred?                                  | Opened 05/16 Last Active 6/22/17             |            |
|     | Number Street City State Zlp Code Who incurred the debt? Check one.    | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|     | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|     | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|     | ☐ Check if this claim is for a community                               | ☐ Student loans  |  |            |
|     | debt<br>Is the claim subject to offset?                                | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|     | ■ No   | Debts to pension or profit-sharin                            |  |            |
|     | Yes  | Other. Specify Credit Card                                   |  |            |
| 4.3 | First Premier Bank   | Last 4 digits of account number                              | 1277   | \$507.00   |
|     | Nonpriority Creditor's Name  601 S Minnesota Ave Sioux Falls, SD 57104 | When was the debt incurred?                                  | Opened 07/14 Last Active 6/05/17             |            |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|     | Debtor 1 only  | ☐ Contingent   |  |            |
|     | ■ Debtor 2 only  | ☐ Unliquidated   |  |            |
|     | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|     | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|     | ☐ Check if this claim is for a community                               | ☐ Student loans  |  |            |
|     | debt   | ☐ Obligations arising out of a sepa                          | ration agreement or divorce that you did not |            |
|     | Is the claim subject to offset?  | report as priority claims                                    |  |            |
|     | No   | Debts to pension or profit-sharin                            |  |            |
|     | Yes  | Other. Specify Credit Card                                   | <u> </u>                                     |            |

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| Debtoi<br>Debtoi | 1 John M Walker<br>2 Kiahini N Dupont                                |  | Case number (if know)                        |            |
|------------------|--|--|--|------------|
| 4.3              | First Premier Bank   | Last 4 digits of account number                              | 2822   | \$415.00   |
|                  | Nonpriority Creditor's Name  |  |  |            |
|                  | 601 S Minnesota Ave<br>Sioux Falls, SD 57104                         | When was the debt incurred?                                  | Opened 03/15 Last Active 7/23/17             |            |
|                  | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                     |            |
|                  | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|                  | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community                             | ☐ Student loans  |  |            |
|                  | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|                  | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |
|                  | Yes  | ■ Other. Specify Credit Card                                 | <u> </u>                                     |            |
| 4.3              | Flagship Credit Acceptance   | Last 4 digits of account number                              |  | \$5,000.00 |
|                  | Nonpriority Creditor's Name PO Box 3807 Coppell, TX 75019            | When was the debt incurred?                                  |  |            |
|                  | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | s: Check all that apply                      |            |
|                  | ☐ Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|                  | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecure                                 | d claim:                                     |            |
|                  | ☐ Check if this claim is for a community                             | ☐ Student loans  |  |            |
|                  | debt Is the claim subject to offset?                                 | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not |            |
|                  | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |
|                  | Yes  | Other. Specify   |  |            |
| 4.3              | Genesis Bankcard Srvs  | Last 4 digits of account number                              | 1334   | \$787.00   |
|                  | Nonpriority Creditor's Name  |  | Opened 09/16 Last Active                     |            |
|                  | 15220 Nw Greenbrier Pkwy Ste 200<br>Beaverton, OR 97006              | When was the debt incurred?                                  | 8/12/17                                      |            |
|                  | Number Street City State Zlp Code                                    | As of the date you file, the claim                           | s: Check all that apply                      |            |
|                  | Who incurred the debt? Check one.                                    |  |  |            |
|                  | Debtor 1 only  | ☐ Contingent   |  |            |
|                  | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|                  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|                  | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|                  | $\square$ Check if this claim is for a community debt                |  | ration agreement or divorce that you did not |            |
|                  | Is the claim subject to offset?                                      | report as priority claims                                    |  |            |
|                  | No   | Debts to pension or profit-sharing                           |  |            |
|                  | Yes  | Other. Specify Credit Card                                   | <u> </u>                                     |            |

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| Deb      | tor 2 Kiahini N Dupont   | Case number (if know)   |   |
|----------|--|---|---|
| 4.4<br>0 | Ginny's  | Last 4 digits of account number   | \$700.00                                |
| <u> </u> | Nonpriority Creditor's Name 1112 7th Ave                             | When was the debt incurred?   | <u>·</u>                                |
|          | Monroe, WI 53566  Number Street City State Zlp Code                  | As of the date you file, the claim is: Check all that apply   |   |
|          | Who incurred the debt? Check one.                                    |   |   |
|          | Debtor 1 only  | ☐ Contingent  |   |
|          | ☐ Debtor 2 only  | ☐ Unliquidated  |   |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |
|          | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured claim:  |   |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans   |   |
|          | debt Is the claim subject to offset?                                 | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims  |   |
|          | No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |   |
|          | Yes  | Other. Specify  |   |
| 4.4<br>1 | Guaranty Bank  | Last 4 digits of account number   | \$500.00                                |
| '        | Nonpriority Creditor's Name  | <del></del>   | • |
|          | PO Box 240200<br>Milwaukee, WI 53224-9410                            | When was the debt incurred?   |   |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |   |
|          | ☐ Debtor 1 only  | ☐ Contingent  |   |
|          | Debtor 2 only  | ☐ Unliquidated  |   |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |   |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans   |   |
|          | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |   |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |   |
|          | ☐ Yes  | ■ Other. Specify Overdraft  |   |
| 4.4      | Harvard Collection   | Last 4 digits of account number 5311  | \$6,704.00                              |
| 2        | Nonpriority Creditor's Name  | Last 4 digits of account number 5311  | ψ0,7 04.00                              |
|          | Attn: Bankruptcy<br>4839 N Elston Ave                                | When was the debt incurred? Opened 01/16  |   |
|          | Chicago, IL 60630  | _   |   |
|          | Number Street City State ZIp Code                                    | As of the date you file, the claim is: Check all that apply   |   |
|          | Who incurred the debt? Check one.                                    | _   |   |
|          | Debtor 1 only  | Contingent  |   |
|          | Debtor 2 only  | Unliquidated  |   |
|          | Debtor 1 and Debtor 2 only   | Disputed  |   |
|          | At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |   |
|          | ☐ Check if this claim is for a community debt                        | Student loans   |   |
|          | Is the claim subject to offset?                                      | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims  |   |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |   |
|          | -  | _ Collection Attorney II Department Of  |   |
|          | ☐ Yes  | Other. Specify Human Service  |   |

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| Hyundal Fine   | Debtor 2 Kiahini N Dupont |   |                                      |  |             |
|--|---------------------------|---|--------------------------------------|--|-------------|
| Attri: Bankruptcy Po Box 20809 Fountain City, CA 92728 Number Street City State 27 Ocheck one.    Debtor 1 and Debtor 2 only   |                           | Hyundai Finc                                      | Last 4 digits of account number      | 9759   | \$21,469.00 |
| Number Street City State Zip Code   Number Incurred the debt? Check one.   Debtor 1 only   Debtor 2 only   Unliquidated   Debtor 1 and Debtor 2 only   Unliquidated   Debtor 1 and Debtor 2 only   Unliquidated   Debtor 2 only   Debtor 3 only 1 only 2 only   Debtor 2 only   Debtor 3 only 2 only   Debtor 4 only 4 onl   |                           | Attn: Bankruptcy<br>Po Box 20809                  | When was the debt incurred?          |  |             |
| Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed At least one of the debtors and another of None None I and Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 |                           | Number Street City State Zlp Code                 | As of the date you file, the claim i | s: Check all that apply                      |             |
| Debtor 1 and Debtor 2 only   |                           | ☐ Debtor 1 only                                   | ☐ Contingent                         |  |             |
| At least one of the debtors and another   Check if this claim is for a community debt   Student loans   Check if this claim subject to offset?   Check if this claim subject to offset?   Contingent   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is to favore the debtor community debt   Check if this claim is for a community debt   Chec   |                           | ■ Debtor 2 only                                   | ☐ Unliquidated                       |  |             |
| Check if this claim is for a community debt   Student loans   Chicago   Check if this claim subject to offset?   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim subject to offset?   Check if this claim is for a community debt   Check if this claim is for a community   Check if this claim is for a    |                           | ☐ Debtor 1 and Debtor 2 only                      | ☐ Disputed                           |  |             |
| Collegations arising out of a separation agreement or divorce that you did not report as pinionly claims   |                           | $\square$ At least one of the debtors and another | _                                    | d claim:                                     |             |
| Is the claim subject to offset?  No  No  No  No  No  No  No  No  No  N   |                           | <u> </u>  |                                      |  |             |
| Ves   Other. Specify   Automobile  |                           |   |                                      | ration agreement or divorce that you did not |             |
| Illinois American Water   Last 4 digits of account number   \$1,000.00   |                           | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts             |             |
| Illinois Department of Revenue   Last 4 digits of account number   S1,000.00   |                           | Yes   | Other. Specify Automobile            | •  |             |
| 300 N Water Works Dr   Belleville, IL 62223   Number Street City State Zip Code   Who incurred the debt? Check one.   Debtor 1 only   Contingent   Debtor 2 only   Unliquidated   Debtor 1 and Debtor 3 and another   Check if this claim is for a community debt   Noprointy Creditor's Name   Bankruptcy Section   PO Box 64338   Chicago, IL 60664-0338   Number Street City State Zip Code   Who incurred the debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 1 only   Debtor 3 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Deb   |                           |   | Last 4 digits of account number      |  | \$1,000.00  |
| Who incurred the debt? Check one.    Debtor 1 only   Contingent     Debtor 2 only   Disputed     Debtor 1 and Debtor 2 only   Disputed     Check if this claim is for a community debt     Is the claim subject to offset?     Ves   Other. Specify  |                           | 300 N Water Works Dr<br>Belleville, IL 62223      | When was the debt incurred?          |  |             |
| □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Debts to pension or profit-sharing plans, and other similar debts □ No □ Debts to pension or profit-sharing plans, and other similar debts □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Nonpriority Creditor's Name □ Bankruptcy Section PO Box 64338 □ Chicago, It. 60664-0338 □ Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Debtor 1 and Debtor 2 only □ Debtor 3 and Debtor 2 only □ Debtor 3 and Debtor 3 and another □ Check if this claim is for a community debt □ Debtor 3 and Debtor 3 and another □ Check if this claim is for a community debt □ Debtor 3 and Debtor 3 and another □ Check if this claim is for a community debt □ Debtor 3 and Debtor 3 and another □ Debtor 4 and Debtor 5 and another □ Check if this claim is for a community debt □ Debtor 5 and another □ Debtor 5 another □ Debtor 5 and another □ Debtor 5 and another □ Debtor 5  |                           | ·   | As of the date you file, the claim i | s: Check all that apply                      |             |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Debtor 1 only □ Debtor 2 only □ Debtor 3 spriority claims □ Other. Specify □ Debtor 3 only Cleditor's Name Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debtor 1 spriority Creditor's Name □ Debtor 1 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 only □ Debtor 7 only □ Debtor 8 only □ Debtor 9 only □ Disputed □ Debtor 1 only □ Disputed □ Debtor 2 only □ Disputed □ Debtor 3 only □ Disputed □ Debtor 4 only □ Disputed □ Debtor 5 only □ Disputed □ Debtor 5 only □ Disputed □ Debtor 6 only □ Disputed □ Debtor 7 only □ Disputed □ Debtor 9 only □ Disputed □ Debtor 9 only □ Disputed □ Debtor 1 only □ Disputed □ Debtor 2 only □ Disputed □ Debtor 3 only □ Disputed □ Debtor 4 only □ Disputed □ Debtor 5 only □ Debtor 5  |                           |   | _                                    |  |             |
| Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Ves    Other. Specify  |                           |   | _                                    |  |             |
| At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim subject to offset? Check if this claim is for a community debt Show Check if this claim is for a community debt Show Check if this claim is for a community debt Show Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim is for a community debt Show Check if this claim is for a community debt Show Check if this claim subject to offset? Check |                           | <u> </u>  | <u> </u>                             |  |             |
| Check if this claim is for a community debt   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Other. Specify   |                           | _   | •                                    | d alaim.                                     |             |
| Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify      |                           | <u>_</u>  | <u></u> '                            | o ciaim:                                     |             |
| Debts to pension or profit-sharing plans, and other similar debts    Ves   |                           | debt  | ☐ Obligations arising out of a sepa  | ration agreement or divorce that you did not |             |
| Yes  |                           | <u> </u>  | <u></u>                              | g plans, and other similar debts             |             |
| Solution   Contingent   Conti   |                           |   | Other. Specify                       |  |             |
| Nonpriority Creditor's Name Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Disputed Type of NonPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  |                           | Illinois Donartment of Povenue                    |                                      |  | Unknown     |
| PO Box 64338 Chicago, IL 60664-0338 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 5 only Debtor 6 NONPRIORITY unsecured claim: Debtor 7 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 NonPRIORITY unsecured claim: Debtor 6 NonPRIORITY unsecured claim: Debtor 7 only Debtor 9 only D | 5                         | Nonpriority Creditor's Name                       | _                                    |  | Olikilowii  |
| Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim: Student loans Debts to pension or fa separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts   |                           | PO Box 64338                                      | When was the debt incurred?          |  |             |
| ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debtor 1 only □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts   |                           | Number Street City State Zlp Code                 | As of the date you file, the claim i | s: Check all that apply                      |             |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts  |                           | Who incurred the debt? Check one.                 |                                      |  |             |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts   |                           | ■ Debtor 1 only                                   | ☐ Contingent                         |  |             |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts   |                           | ☐ Debtor 2 only                                   | ☐ Unliquidated                       |  |             |
| ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts   |                           | ☐ Debtor 1 and Debtor 2 only                      | ·                                    |  |             |
| debt    Obligations arising out of a separation agreement or divorce that you did not report as priority claims   No   |                           | $\square$ At least one of the debtors and another | <u></u> '                            | d claim:                                     |             |
| Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts   |                           | <u> </u>  | _                                    |  |             |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts   |                           |   |                                      | ration agreement or divorce that you did not |             |
|  |                           |   | <u></u>                              | g plans, and other similar debts             |             |
|  |                           | Yes   | ■ Other. Specify Notice Only         | 1  |             |

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Debtor 2 Kiahini N Dupont Case number (if know) 4.4 **Illinois Dept of Employment Securit Notic Only** Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name **Bankruptcy Unit Collection** When was the debt incurred? Subdivis 33 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice Only 4.4 Kovach Eye Institute \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name 1960 Springbrook Square When was the debt incurred? Naperville, IL 60564 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 Mabt/contfin 4495 Last 4 digits of account number \$796.00 8 Nonpriority Creditor's Name Opened 02/15 Last Active 121 Continental Dr Ste 1 8/06/17 When was the debt incurred? **Newark, DE 19713** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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| Debtor 2 Kiahini N Dupont |   |  |  |            |
|---------------------------|---|--|--|------------|
| 4.4                       | Mabt/contfin  | Last 4 digits of account number  | 4651   | \$651.00   |
|                           | Nonpriority Creditor's Name  121 Continental Dr Ste 1 Newark, DE 19713  | When was the debt incurred?  | Opened 12/16/14 Last Active 8/13/17                    |            |
|                           | Number Street City State Zlp Code Who incurred the debt? Check one.   | As of the date you file, the claim   | is: Check all that apply                               |            |
|                           | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No   | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing   | aration agreement or divorce that you did not          |            |
|                           | Yes   | Other. Specify Credit Card   | d  |            |
| 4.5                       | Massey's Shoes Nonpriority Creditor's Name  | Last 4 digits of account number  |  | \$500.00   |
|                           | Monroe, WI 53556-8020  Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No | When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Shoes | d claim: aration agreement or divorce that you did not |            |
| 4.5                       | Maxlend   | Last 4 digits of account number  |  | \$1,000.00 |
|                           | Nonpriority Creditor's Name PO Box 639 Parshall, ND 58770 Number Street City State Zlp Code Who incurred the debt? Check one  | When was the debt incurred?  As of the date you file, the claim  | is: Check all that apply                               |            |
|                           | Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No   | report as priority claims  Debts to pension or profit-sharing  | aration agreement or divorce that you did not          |            |
|                           | ☐ Yes   | Other. Specify Loan  |  |            |

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Debtor 2 Kiahini N Dupont Case number (if know) 4.5 **Mccarthy Burgess & Wol** 0000 \$550.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 26000 Cannon Rd When was the debt incurred? **Opened 05/17** Cleveland, OH 44146 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Commonwealth Edison** Other. Specify ☐ Yes Company Ak 4.5 **Merchants Credit** 4074 \$2,792.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? **Opened 10/15** Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Adventist Bolingbrook** ☐ Yes Other. Specify Hospital 4.5 \$900.00 **Merchants Credit** 1178 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? **Opened 11/12** Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Adventist Bolingbrook** Other. Specify Hospital ☐ Yes

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| 2 Kiahini N Dupont   |   | Case number (if know)                         |      |
|--|---|---|------|
| Mid America Bk/total C   | Last 4 digits of account number                               | 7839  | \$47 |
| Nonpriority Creditor's Name  | _   |   |      |
| 5109 S Broadband Ln<br>Sioux Falls, SD 57108                         | When was the debt incurred?                                   | Opened 09/16 Last Active 9/01/17              |      |
| Number Street City State Zlp Code                                    | As of the date you file, the claim                            | is: Check all that apply                      |      |
| Who incurred the debt? Check one.                                    |   |   |      |
| ■ Debtor 1 only  | ☐ Contingent  |   |      |
| Debtor 2 only  | ☐ Unliquidated  |   |      |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |      |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecure                                  | d claim:                                      |      |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |   |      |
| debt Is the claim subject to offset?                                 | report as priority claims                                     | aration agreement or divorce that you did not |      |
| ■ No   | ☐ Debts to pension or profit-sharing                          | ng plans, and other similar debts             |      |
| Yes  | ■ Other. Specify Credit Card                                  | <u> </u>                                      |      |
| Midnight Velvet  | Last 4 digits of account number                               | 4290  | \$46 |
| Nonpriority Creditor's Name  | _   |   |      |
| Swiss Colony/Midnight Velvet<br>1112 7th Ave                         | When was the debt incurred?                                   | Opened 9/22/17 Last Active 10/17              |      |
| Monroe, WI 53566   |   |   |      |
| Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                            | is: Check all that apply                      |      |
| Debtor 1 only  | Пол   |   |      |
| _  | Contingent  |   |      |
| Debtor 2 only  | ☐ Unliquidated  |   |      |
| Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecure                      | d claim:                                      |      |
| At least one of the debtors and another                              | Student loans   | u ciaiii.                                     |      |
| ☐ Check if this claim is for a community debt                        | _   | aration agreement or divorce that you did not |      |
| Is the claim subject to offset?                                      | report as priority claims                                     | aration agreement or divorce that you did not |      |
| ■ No   | ☐ Debts to pension or profit-sharing                          | ng plans, and other similar debts             |      |
| Yes  | Other. Specify Charge Ac                                      | count   |      |
| Midnight Velvet  | Last 4 digits of account number                               |   | \$50 |
| Nonpriority Creditor's Name  |   |   | 700  |
| 1112 7th Avenue<br>Monroe, WI 53566                                  | When was the debt incurred?                                   |   |      |
| Number Street City State Zlp Code                                    | As of the date you file, the claim                            | is: Check all that apply                      |      |
| Who incurred the debt? Check one.                                    |   |   |      |
| Debtor 1 only  | Contingent  |   |      |
| Debtor 2 only  | ☐ Unliquidated  |   |      |
| ■ Debtor 1 and Debtor 2 only   | Disputed  | d alata.                                      |      |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecure                                  | a ciaim:                                      |      |
| Check if this claim is for a community debt                          | ☐ Student loans   | and the second second                         |      |
| Is the claim subject to offset?                                      | Obligations arising out of a separe report as priority claims | aration agreement or divorce that you did not |      |
| ■ No   | Debts to pension or profit-sharir                             | ng plans, and other similar debts             |      |
| □ Yes  | <u> </u>  | J. ,  |      |
| <b>□</b> 162   | Other. Specify  |   |      |

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Debtor 2 Kiahini N Dupont Case number (if know) 4.5 \$200.00 **Nicor Gas** Last 4 digits of account number 8 Nonpriority Creditor's Name **Attention: Bankruptcy Department** When was the debt incurred? PO Box 549 Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacktriangledown Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Utility 4.5 **Nicor Gas** \$800.00 Last 4 digits of account number Nonpriority Creditor's Name **Attention: Bankruptcy Department** When was the debt incurred? PO Box 549 Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utility 4.6 **Opportunity Financial** \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name 11 E Adams St, Suite 501 When was the debt incurred? Chicago, IL 60603 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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| 2 Kiahini N Dupont   | Case number (if know)   |         |
|--|---|---------|
| Progressive  | Last 4 digits of account number   | \$800.0 |
| Nonpriority Creditor's Name  |   | ******* |
| 11629 S 700 E, Ste 250   | When was the debt incurred?   |         |
| Draper, UT 84020  Number Street City State Zlp Code                  | As of the date you file, the claim is: Check all that apply   |         |
| Who incurred the debt? Check one.                                    | no of the date you me, the claim of chook an that apply   |         |
| Debtor 1 only  | ☐ Contingent  |         |
| Debtor 2 only  | _   |         |
| ■ Debtor 1 and Debtor 2 only   | ☐ Unliquidated  |         |
| _  | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |         |
| At least one of the debtors and another                              | Student loans   |         |
| ☐ Check if this claim is for a community debt                        | ☐ Obligations arising out of a separation agreement or divorce that you did not                         |         |
| Is the claim subject to offset?                                      | report as priority claims   |         |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |         |
| Yes  | Other. Specify  |         |
|  |   |         |
| Seventh Avenue   | Last 4 digits of account number   | \$500.  |
| Nonpriority Creditor's Name 1112 7th Avenue                          | When was the debt incurred?   |         |
| Monroe, WI 53566   |   |         |
| Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply   |         |
| Who incurred the debt? Check one.                                    |   |         |
| ☐ Debtor 1 only  | ☐ Contingent  |         |
| ☐ Debtor 2 only  | ☐ Unliquidated  |         |
| ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |         |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |         |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |         |
| debt   | $\square$ Obligations arising out of a separation agreement or divorce that you did not                 |         |
| Is the claim subject to offset?                                      | report as priority claims   |         |
| No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |         |
| Yes  | Other. Specify  |         |
| Stoneberry   | Last 4 digits of account number   | \$500.  |
| Nonpriority Creditor's Name  |   |         |
| PO Box 2820  | When was the debt incurred?   |         |
| Monroe, WI 53566   | As of the data you file the plain in O  |         |
| Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |         |
| Debtor 1 only  |   |         |
| Debtor 2 only  | Contingent  |         |
| _  | Unliquidated  |         |
| ■ Debtor 1 and Debtor 2 only   | Disputed  |         |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |         |
| Check if this claim is for a community                               | ☐ Student loans   |         |
| debt Is the claim subject to offset?                                 | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |         |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |         |
|  | _   |         |
| Yes  | Other. Specify  |         |

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Debtor 2 Kiahini N Dupont Case number (if know) 4.6 \$1,000.00 Surge Last 4 digits of account number 4 Nonpriority Creditor's Name PO Box 31292 When was the debt incurred? Tampa, FL 33631 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 Synchrony Bank/ JC Penneys 5399 \$767.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/15 Last Active When was the debt incurred? Po Box 965060 8/18/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.6 Synchrony Bank/ JC Penneys 9141 \$478.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/16 Last Active Po Box 965060 When was the debt incurred? 5/12/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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| Debt     | or 2 Kiahini N Dupont   |  |  |          |
|----------|---|--|--|----------|
| .6       | Synchrony Bank/TJX  | Last 4 digits of account number                                  | 8010   | \$273.00 |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060                              | When was the debt incurred?                                      | Opened 1/15/17 Last Active 10/01/17          |          |
|          | Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                               | s: Check all that apply                      |          |
|          | ☐ Debtor 1 only   | ☐ Contingent   |  |          |
|          | ☐ Debtor 2 only   | ☐ Unliquidated   |  |          |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |          |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                    | d claim:                                     |          |
|          | ☐ Check if this claim is for a community  | ☐ Student loans  |  |          |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims     | ration agreement or divorce that you did not |          |
|          | ■ No  | Debts to pension or profit-sharing                               | g plans, and other similar debts             |          |
|          | ☐ Yes   | Other. Specify Charge Acc  | count  |          |
| I.6      | Synchrony Bank/Walmart  | Last 4 digits of account number                                  | 8359   | \$294.00 |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060                              | When was the debt incurred?                                      | Opened 10/16 Last Active 10/01/17            |          |
|          | Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                               | s: Check all that apply                      |          |
|          | Debtor 1 only   | ☐ Contingent   |  |          |
|          | ■ Debtor 2 only   | ☐ Unliquidated   |  |          |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |          |
|          | $\square$ At least one of the debtors and another                                       | Type of NONPRIORITY unsecured                                    | d claim:                                     |          |
|          | ☐ Check if this claim is for a community  | Student loans  |  |          |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a sepa<br>report as priority claims | ration agreement or divorce that you did not |          |
|          | ■ No  | Debts to pension or profit-sharing                               | g plans, and other similar debts             |          |
|          | Yes   | ■ Other. Specify Charge Acc                                      | count  |          |
| 4.6<br>9 | Synchrony Bank/Walmart  | Last 4 digits of account number                                  | 0403   | \$98.00  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896            | When was the debt incurred?                                      | Opened 01/15 Last Active 10/03/17            |          |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                     | As of the date you file, the claim                               | s: Check all that apply                      |          |
|          | Debtor 1 only   | ☐ Contingent   |  |          |
|          | Debtor 2 only   | ☐ Unliquidated   |  |          |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |          |
|          | $\square$ At least one of the debtors and another                                       | Type of NONPRIORITY unsecured                                    | d claim:                                     |          |
|          | ☐ Check if this claim is for a community debt   |  | ration agreement or divorce that you did not |          |
|          | Is the claim subject to offset?   | report as priority claims  | a plane, and other similar debte             |          |
|          | ■ No  | ☐ Debts to pension or profit-sharin                              | • •  |          |
|          | ☐ Yes   | Other. Specify Charge Acc  | count  |          |

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| Debt | or 2 Kiahini N Dupont                                  | Case number (if know)   |          |
|------|--|---|----------|
| .7   | Toward National Donle                                  |   | ¢500.00  |
| )    | Target National Bank  Nonpriority Creditor's Name      | Last 4 digits of account number   | \$500.00 |
|      | PO Box 9475  | When was the debt incurred?   |          |
|      | Minneapolis, MN 55440                                  |   |          |
|      | Number Street City State Zlp Code                      | As of the date you file, the claim is: Check all that apply   |          |
|      | Who incurred the debt? Check one.                      |   |          |
|      | Debtor 1 only  | ☐ Contingent  |          |
|      | Debtor 2 only  | ☐ Unliquidated  |          |
|      | ■ Debtor 1 and Debtor 2 only                           | ☐ Disputed  |          |
|      | ☐ At least one of the debtors and another              | Type of NONPRIORITY unsecured claim:  |          |
|      | ☐ Check if this claim is for a community               | ☐ Student loans   |          |
|      | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                         |          |
|      | Is the claim subject to offset?                        | report as priority claims   |          |
|      | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |          |
|      | Yes  | Other. Specify  |          |
| .7   | TCF National Bank                                      |   | \$500.00 |
|      | Nonpriority Creditor's Name                            | Last 4 digits of account number   | φ300.00  |
|      | Attn: Bankruptcy                                       | When was the debt incurred?   |          |
|      | 800 Burr Ridge   |   |          |
|      | Willowbrook, IL 60527                                  |   |          |
|      | Number Street City State ZIp Code                      | As of the date you file, the claim is: Check all that apply   |          |
|      | Who incurred the debt? Check one.                      |   |          |
|      | ☐ Debtor 1 only  | Contingent  |          |
|      | Debtor 2 only  | ☐ Unliquidated  |          |
|      | ■ Debtor 1 and Debtor 2 only                           | ☐ Disputed  |          |
|      | $\square$ At least one of the debtors and another      | Type of NONPRIORITY unsecured claim:  |          |
|      | ☐ Check if this claim is for a community               | ☐ Student loans   |          |
|      | debt   | Obligations arising out of a separation agreement or divorce that you did not                           |          |
|      | Is the claim subject to offset?                        | report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts          |          |
|      | ■ No   |   |          |
|      | Yes  | Other. Specify Consumer Debt/ Ovrdraft  |          |
| .7   | Transworld   | Last 4 digits of account number   | \$0.00   |
|      | Nonpriority Creditor's Name                            | <del></del>   |          |
|      | 9525 Sweet Valley Dr                                   | When was the debt incurred?   |          |
|      | Cleveland, OH 44125  Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply   |          |
|      | Who incurred the debt? Check one.                      | As of the date you me, the damins. Oneok an that apply  |          |
|      | Debtor 1 only  | ☐ Contingent  |          |
|      | ☐ Debtor 2 only  |   |          |
|      | <u> </u>   | ☐ Unliquidated  |          |
|      | ■ Debtor 1 and Debtor 2 only                           | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |          |
|      | ☐ At least one of the debtors and another              | Student loans   |          |
|      | ☐ Check if this claim is for a community debt          | _ *****   |          |
|      | Is the claim subject to offset?                        | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |
|      | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |          |
|      | ☐ Yes  |   |          |
|      | <b>□</b> 169   | Other. Specify  |          |

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| 2 Kiahini N Dupont   | Case number (if know)   |   |          |  |  |
|--|---|---|----------|--|--|
| US Bank/Rms CC   | Last 4 digits of account number   | 1532  | \$211.   |  |  |
| Nonpriority Creditor's Name Card Member Services Po Box 108                              | When was the debt incurred?   | Opened 03/14 Last Active 9/25/17              |          |  |  |
| St Louis, MO 63166  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim  | is: Check all that apply                      |          |  |  |
| ■ Debtor 1 only  | ☐ Contingent  |   |          |  |  |
| □ Debtor 2 only  | ☐ Unliquidated  |   |          |  |  |
| Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |          |  |  |
| ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure  | d claim:                                      |          |  |  |
| ☐ Check if this claim is for a community   | ☐ Student loans   |   |          |  |  |
| debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims  | aration agreement or divorce that you did not |          |  |  |
| ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts              |          |  |  |
| Yes  | Other. Specify Credit Line  | Secured                                       |          |  |  |
| Verve  | Last 4 digits of account number   |   | \$1,000. |  |  |
| Nonpriority Creditor's Name PO box 31292   | When was the debt incurred?   |   |          |  |  |
| Tampa, FL 33631  Number Street City State Zlp Code  Who incurred the debt? Check one.    | As of the date you file, the claim  | is: Check all that apply                      |          |  |  |
| Debtor 1 only  | Пол   |   |          |  |  |
| Debtor 2 only  | ☐ Contingent  |   |          |  |  |
| ■ Debtor 1 and Debtor 2 only   | ☐ Unliquidated  |   |          |  |  |
| ☐ At least one of the debtors and another  | ☐ Disputed  Type of NONPRIORITY unsecure  | d claim:                                      |          |  |  |
| ☐ Check if this claim is for a community   | □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts |   |          |  |  |
| debt Is the claim subject to offset?   |   |   |          |  |  |
| ■ No   |   |   |          |  |  |
| Yes  | Other. Specify  |   |          |  |  |
| Visa Dept Store National   |   | 0.04  |          |  |  |
| Bank/Macy's Nonpriority Creditor's Name  | Last 4 digits of account number   | 0494  | \$294.   |  |  |
| Attn: Bankruptcy Po Box 8053   | When was the debt incurred?   | Opened 01/15 Last Active 10/12/17             |          |  |  |
| Mason, OH 45040  |   |   |          |  |  |
| Number Street City State Zlp Code  Who incurred the debt? Check one.                     | As of the date you file, the claim  | s: Check all that apply                       |          |  |  |
| Debtor 1 only  | Пол   |   |          |  |  |
| Debtor 2 only  | ☐ Contingent☐ Unliquidated  |   |          |  |  |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only   | ☐ Unilquidated ☐ Disputed   |   |          |  |  |
| ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure  | d claim:                                      |          |  |  |
| ☐ Check if this claim is for a community   | ☐ Student loans   |   |          |  |  |
| debt Is the claim subject to offset?   |   | eration agreement or divorce that you did not |          |  |  |
| ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts              |          |  |  |
| □ Yes  | ■ Other Specify Charge Acc  |   |          |  |  |

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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| Debtor 1 John M Walker Debtor 2 Kiahini N Dupont   |  | Case nu        | umber (  | (if know)   |                             |
|--|--|----------------|----------|---|-----------------------------|
| have more than one creditor for any of the debt-<br>notified for any debts in Parts 1 or 2, do not fill o                    |  | additional cre | ditors h | nere. If you do not hav                                     | ve additional persons to be |
| Name and Address<br>Comcast<br>PO Box 3002<br>Southeastern, PA 19398   | On which entry in Part 1 or Part 2 did Line 4.16 of (Check one):  Last 4 digits of account number          | Part 1: C      | reditors | editor?<br>with Priority Unsecure<br>with Nonpriority Unsec |                             |
| Name and Address<br>ComEd Attn: Bkcy Group<br>1919 Swift Dr<br>Oak Brook Terrace, IL 60523                                   | On which entry in Part 1 or Part 2 did<br>Line <b>4.17</b> of ( <i>Check one</i> ):                        | Part 1: C      | reditors | editor?<br>with Priority Unsecure<br>with Nonpriority Unsec |                             |
| Name and Address<br>Illinois Department of Human Serv.<br>Cash Management Unit<br>PO Box 19407<br>Springfield, IL 62794-9407 | On which entry in Part 1 or Part 2 die Line 4.42 of ( <i>Check one</i> ):  Last 4 digits of account number | ☐ Part 1: C    | reditors | editor?<br>with Priority Unsecure<br>with Nonpriority Unsec |                             |
| Name and Address<br>Nicor Gas Co.<br>1844 Ferry Road<br>Naperville, IL 60563   | On which entry in Part 1 or Part 2 did<br>Line 4.58 of (Check one):  | Part 1: C      | reditors | editor?<br>with Priority Unsecure<br>with Nonpriority Unsec |                             |
| Name and Address<br>Nicor Gas Co.<br>1844 Ferry Road<br>Naperville, IL 60563   | On which entry in Part 1 or Part 2 die Line 4.59 of ( <i>Check one</i> ):  Last 4 digits of account number | ☐ Part 1: C    | reditors | editor?<br>with Priority Unsecure<br>with Nonpriority Unsec |                             |
| Name and Address<br>Shindler & Joyce<br>1990 E Algonquin #180<br>Schaumburg, IL 60173  | On which entry in Part 1 or Part 2 die Line 4.12 of (Check one):  Last 4 digits of account number          | Part 1: C      | reditors | editor?<br>with Priority Unsecure<br>with Nonpriority Unsec |                             |
| Name and Address<br>Will County Circuit Clerk<br>14 W Jefferson<br>Joliet, IL 60432  | On which entry in Part 1 or Part 2 did Line 4.12 of (Check one):  Last 4 digits of account number          | Part 1: 0      | reditors | editor?<br>with Priority Unsecure<br>with Nonpriority Unsec |                             |
| Part 4: Add the Amounts for Each Type of the Amounts of certain types of unsecured type of unsecured claim.                  |  | ical reporting | purpose  |   | 9. Add the amounts for each |
| 6a. Domestic support obliga  | tions  | 6a.            | \$       | Total Claim   | 0.00                        |

|              |     |   |     | Total Claim     |
|--------------|-----|---|-----|-----------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| rom Part 1   | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>15,000.00 |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>15,000.00 |
|              |     |   |     | Total Claim     |
|              | 6f. | Student loans   | 6f. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>88,335.00 |

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Debtor 1 John M Walker
Debtor 2 Kiahini N Dupont Case number (if know)

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **88,335.00** 

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|                     |                          | DOGUITIE          | III Paue of Oros |                                     |
|---------------------|--------------------------|-------------------|------------------|-------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |                  |                                     |
| Debtor 1            | John M Walker            |                   |                  |                                     |
|                     | First Name               | Middle Name       | Last Name        |                                     |
| Debtor 2            | Kiahini N Dupont         |                   |                  |                                     |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |                                     |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |                                     |
| Case number         |                          |                   |                  |                                     |
| (if known)          |                          |                   |                  | ☐ Check if this is a amended filing |

#### Official Form 106G

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı   | Person or | company with | whom you have the | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-------------------|---------------------|---|
| 2.1 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            | <del>_</del>                            |
| 2.2 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     | _                                       |
|     | City      |              | State             | ZIP Code            | <u> </u>                                |
| 2.3 | ,         |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            | _                                       |
| 2.4 |           |              | Oldio             |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     | <u> </u>                                |
|     | City      |              | State             | ZIP Code            | _                                       |
| 2.5 | - ity     |              | <u> </u>          | 211 0000            |   |
|     | Name      |              |                   |                     | _                                       |
|     | Number    | Street       |                   |                     | <u> </u>                                |
|     | City      |              | State             | ZIP Code            | <u> </u>                                |

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|                                 |   | Docume   | nt Page 52 ເ              | of 8.3   |
|---------------------------------|---|--|---------------------------|--|
| Fill in this in                 | nformation to identify your o   | case:  |                           |  |
| Debtor 1                        | John M Walker   |  |                           |  |
| DODIO! 1                        | First Name  | Middle Name  | Last Name                 |  |
| Debtor 2                        | Kiahini N Dupont  |  |                           |  |
| (Spouse if, filing              | First Name  | Middle Name  | Last Name                 |  |
| United State                    | es Bankruptcy Court for the:  | NORTHERN DISTRICT                                  | OF ILLINOIS               |  |
| Case number                     | ⊇r  |  |                           |  |
| (if known)                      |   |  |                           | ☐ Check if this is an  |
|                                 |   |  |                           | amended filing   |
| Schedu                          |   | e also liable for any deb                          |                           | 12/15 as complete and accurate as possible. If two married   |
| ill it out, and<br>our name a   | d number the entries in the land case number (if known).  | boxes on the left. Attach<br>Answer every question | the Additional Page t     | tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write   |
| 1. Do yo                        | ou have any codebtors? (If y  | ou are filing a joint case, o                      | do not list either spouse | as a codebtor.   |
| ■ No                            |   |  |                           |  |
| □ Yes                           |   |  |                           |  |
| Arizona                         | in the last 8 years, have you, California, Idaho, Louisiana,<br>Go to line 3.<br>Did your spouse, former spou | Nevada, New Mexico, Pu                             | erto Rico, Texas, Wash    | ry? (Community property states and territories include ington, and Wisconsin.)   |
| in line 2<br>Form 10<br>out Col | 2 again as a codebtor only if<br>06D), Schedule E/F (Official   | that person is a guarant                           | tor or cosigner. Make     | r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fill Column 2: The creditor to whom you owe the debt |
|                                 | ame, Number, Street, City, State and ZIF  | <sup>o</sup> Code                                  |                           | Check all schedules that apply:  |
| 2.1                             |   |  |                           | Cahadula D. lina   |
| 3.1                             | ame   |  |                           | □ Schedule D, line<br>□ Schedule E/F, line   |
|                                 |   |  |                           | ☐ Schedule G, line   |
|                                 |   |  |                           |  |
|                                 | umber Street<br>ity   | State  | ZIP Code                  |  |
|                                 |   |  |                           |  |
| 3.2                             | ame   |  |                           | Schedule D, line   |
| INC                             | u   |  |                           | ☐ Schedule E/F, line   |
|                                 |   |  |                           | ☐ Schedule G, line   |
|                                 | umber Street  |  |                           | _  |
| Ci                              | ity   | State  | ZIP Code                  |  |

Schedule H: Your Codebtors

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| Fill                    | in this information to ider   | ntify your ca                   | ise:   |  |             |                |                    |                        |                       |                                      |                 |
|-------------------------|---|---------------------------------|--|--|-------------|----------------|--------------------|------------------------|-----------------------|--------------------------------------|-----------------|
| Deb                     | otor 1 Joh  | nn M Walk                       | ker  |  |             |                |                    |                        |                       |                                      |                 |
|                         | otor 2 Kia  | hini N Du                       | pont   |  |             | _              |                    |                        |                       |                                      |                 |
| Uni                     | ted States Bankruptcy Co  | ourt for the:                   | NORTHERN DISTRIC   | T OF ILLINOIS                                |             |                |                    |                        |                       |                                      |                 |
| (If kn                  | se number   | CI.                             |  |  |             |                | □ An               |                        | d filing<br>ent show  | ving postpetition<br>following date: |                 |
|                         | fficial Form 10   |                                 |  |  |             |                | M                  | M / DD/ Y              | YYY                   |                                      |                 |
| So                      | chedule I: You  | ur Inco                         | ome  |  |             |                |                    |                        |                       |                                      | 12/1            |
| suppos<br>spor<br>attac | plying correct informatiuse. If you are separate ch a separate sheet to t | ion. If you and you his form. O | ible. If two married peo<br>are married and not filir<br>r spouse is not filing wi<br>On the top of any addition | ng jointly, and your<br>th you, do not inclu | spouse i    | is liv<br>mati | ing with yon about | you, inclu<br>your spo | ude info<br>use. If r | rmation about more space is          | your<br>needed, |
| 1.                      | Fill in your employme information.  | nt                              |  | Debtor 1                                     |             |                |                    | Debtor 2               | or non-               | -filing spouse                       |                 |
|                         | If you have more than o   |                                 | Employment status  | ■ Employed                                   |             |                |                    | ■ Emplo                | yed                   |                                      |                 |
|                         | attach a separate page information about addit                            |                                 | Employment status  | ☐ Not employed                               |             |                |                    | ☐ Not employed         |                       |                                      |                 |
|                         | employers.  |                                 | Occupation   |  |             |                |                    |                        |                       |                                      |                 |
|                         | Include part-time, seas self-employed work.                               | onal, or                        | Employer's name  | BNSF Railway                                 |             |                |                    | Rockled                | dge fur               | niture                               |                 |
|                         | Occupation may include or homemaker, if it app                            |                                 | Employer's address   |  |             |                |                    |                        |                       |                                      |                 |
|                         |   |                                 | How long employed th   | nere?  |             |                |                    | _                      |                       |                                      |                 |
| Par                     | t 2: Give Details   | About Mon                       | thly Income  |  |             |                |                    |                        |                       |                                      |                 |
| Esti                    |   | s of the da                     | ate you file this form. If y   | ou have nothing to r                         | eport for   | any            | line, write        | \$0 in the             | space. I              | Include your no                      | n-filing        |
| •                       | u or your non-filing spous<br>e space, attach a separat                   |                                 | re than one employer, co<br>this form.   | mbine the informatio                         | n for all e | empl           | oyers for tl       | hat perso              | n on the              | lines below. If                      | you need        |
|                         |   |                                 |  |  |             |                | For Debi           | tor 1                  |                       | ebtor 2 or<br>filing spouse          |                 |
| 2.                      |   |                                 | ry, and commissions (becalculate what the monthly  |  | 2.          | \$             | 7,9                | 983.92                 | \$                    | 3,320.34                             |                 |
| 3.                      | Estimate and list mon   | thly overti                     | me pay.  |  | 3.          | +\$            |                    | 0.00                   | +\$_                  | 0.00                                 |                 |
| 4.                      | Calculate gross Incom   | ne. Add lin                     | e 2 + line 3.  |  | 4.          | \$             | 7,98               | 3.92                   | \$                    | 3,320.34                             |                 |

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|     | otor 1<br>otor 2      | John M Walker<br>Kiahini N Dupont  | _        | С   | ase number (if known) |        |                                  |                |              |
|-----|-----------------------|--|----------|-----|-----------------------|--------|----------------------------------|----------------|--------------|
|     |                       |  |          |     | For Debtor 1          |        | or Debtor 2 or<br>on-filing spou |                |              |
|     | Cop                   | y line 4 here  | 4.       | -   | \$ 7,983.92           | \$     | 3,320                            |                |              |
| 5.  | List                  | all payroll deductions:  |          |     |                       |        |                                  |                |              |
|     | 5a.                   | Tax, Medicare, and Social Security deductions  | 5a.      | . : | \$ 1,756.96           | \$     | 739                              | .76            |              |
|     | 5b.                   | Mandatory contributions for retirement plans   | 5b.      | . : | \$ 928.56             | \$     | 0                                | .00            |              |
|     | 5c.                   | Voluntary contributions for retirement plans   | 5c.      |     | \$0.00                | \$     | 91                               | .47            |              |
|     | 5d.                   | Required repayments of retirement fund loans   | 5d.      |     | \$ 78.38              | \$_    |                                  | .00            |              |
|     | 5e.                   | Insurance  | 5e.      |     | \$ 417.64             | \$_    |                                  | .99            |              |
|     | 5f.                   | Domestic support obligations   | 5f.      |     | \$ 0.00               | \$_    |                                  | .00            |              |
|     | 5g.                   | Union dues   | 5g.      |     | \$ 0.00               | \$_    |                                  | .00            |              |
|     | 5h.                   | Other deductions. Specify:   | 5h.      |     | \$ 0.00               | + \$   |                                  | .00            |              |
| 6.  |                       | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.       | (   |                       | \$_    | 900                              |                |              |
| 7.  | Cal                   | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.       | 9   | 4,802.38              | \$_    | 2,420                            | .12            |              |
| 8.  | List<br>8a.           | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total              |          |     |                       |        |                                  |                |              |
|     |                       | monthly net income.  | 8a.      | . : | \$0.00                | \$     | 0                                | .00            |              |
|     | 8b.                   | Interest and dividends   | 8b.      | . : | \$ 0.00               | \$     | 0                                | .00            |              |
|     | 8c.                   | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.      | . : | \$ 0.00               | \$     | 0                                | .00            |              |
|     | 8d.                   | Unemployment compensation  | 8d.      | . : | \$ 0.00               | \$     | 0                                | .00            |              |
|     | 8e.                   | Social Security  | 8e.      | . : | \$ 30.02              | \$     | 0                                | .00            |              |
|     | 8f.                   | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:   | e<br>8f. | ;   | \$ 0.00               | \$     | 0                                | 0.00           |              |
|     | 8g.                   | Pension or retirement income   | 8g.      | . : | \$ 0.00               | \$     | 0                                | .00            |              |
|     |                       | Money from state for caretaking  |          |     |                       |        | _                                |                |              |
|     | 8h.                   | Other monthly income. Specify: mother  | 8h.      | +   | \$ 381.65             | + \$ _ | 0                                | .00            |              |
| 9.  | Add                   | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.       | \$  | 411.67                | \$_    |                                  | 0.00           |              |
| 10. | Cal                   | culate monthly income. Add line 7 + line 9.  | 10.      | \$  | 5,214.05 + \$         | 2      | 2,420.12 = \$                    |                | 7,634.17     |
|     |                       | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | ,        | · — | 0,214.00              |        | ., 120.12                        |                | 7,00-1.17    |
| 11. | Incli<br>othe<br>Do i | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify: | deper    |     |                       |        |                                  |                | 0.00         |
| 12. |                       | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies  |          |     |                       |        |                                  | -              | 7,634.17     |
| 13. | Do :                  | you expect an increase or decrease within the year after you file this form<br>No.   | ?        |     |                       |        |                                  | mbine<br>nthly | ed<br>income |
|     |                       | Yes, Explain:  |          |     |                       |        |                                  |                |              |

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| Fill-i         | n this informa        | tion to identify y                                   | our case.  |  | 1                        |   |   |
|----------------|-----------------------|--|--|--|--------------------------|---|---|
|                |                       |  |  |  | Ch.                      | al if this is                             |   |
| Debt           | OF 1                  | John M Wal   | ker  |  | Cne<br>□                 | eck if this is:  An amended filing        |   |
| Debt           |                       | Kiahini N Du   | <b>J</b> pont  |  |                          | A supplement show                         | ving postpetition chapter                             |
| (Spo           | use, if filing)       |  |  |  |                          | 13 expenses as of                         | the following date:                                   |
| Unite          | d States Bankr        | ruptcy Court for the                                 | e: NORTHERN DISTRICT OF ILLIN  | OIS  |                          | MM / DD / YYYY                            |   |
| Case<br>(If kn | number                |  |  |  |                          |   |   |
| (II KII        |                       |  |  |  |                          |   |   |
| Of             | ficial Fo             | rm 106J  |  |  |                          |   |   |
|                |                       |  | Expenses   |  |                          |   | 12/1  |
| info           | rmation. If m         | ore space is ne<br>n). Answer eve                    |  |  |                          |   |   |
| Part<br>1.     | Is this a joir        | ibe Your House<br>nt case?                           | ehold  |  |                          |   |   |
|                | ☐ No. Go to           |  |  |  |                          |   |   |
|                | ■ Yes. Doe            | s Debtor 2 live                                      | in a separate household?   |  |                          |   |   |
|                | ■ N                   | _  | st file Official Form 106J-2, Expenses   | for Sanarata House   | ahold of Del             | otor 2                                    |   |
|                |                       |  | •  | i ioi Separate House   | enola oi Del             | JiOI 2.                                   |   |
| 2.             | Do you have           | e dependents?  | □ No   |  |                          |   |   |
|                | Do not list Debtor 2. | ebtor 1 and  | ■ Yes. Fill out this information for each dependent  | Dependent's relation Debtor 1 or Debtor  |                          | Dependent's age                           | Does dependent live with you?                         |
|                | Do not state          | the  |  |  |                          |   | □ No  |
|                | dependents            | names.   |  | Child  |                          |   | Yes   |
|                |                       |  |  | Child  |                          | 24  | □ No  |
|                |                       |  |  | Cilia  |                          |   | ■ Yes<br>□ No   |
|                |                       |  |  | Child  |                          | 23  | ■ Yes   |
|                |                       |  |  |  |                          |   | □ No  |
|                |                       |  |  | Child  |                          | 26  | Yes   |
| 3.             | expenses of           | penses include<br>f people other t<br>d your depende | than $\square$   |  |                          |   |   |
| expe           | mate your ex          | penses as of y                                       | ing Monthly Expenses<br>rour bankruptcy filing date unless y<br>bankruptcy is filed. If this is a supp   | ou are using this follower that the second s | orm as a s<br>J, check t | upplement in a Cha<br>he box at the top o | apter 13 case to report<br>f the form and fill in the |
| the            |                       | n assistance an                                      | non-cash government assistance in the description of the description o |  |                          | Your expe                                 | enses   |
|                |                       |  |  |  |                          |   |   |
| 4.             |                       |  | ship expenses for your residence. In the ground or lot.  | nclude first mortgage  | e<br>4.                  | \$  | 2,325.00  |
|                | If not includ         | led in line 4:                                       |  |  |                          |   |   |
|                | 4a. Real e            | estate taxes   |  |  | 4a.                      | \$  | 0.00  |
|                |                       |  | 's, or renter's insurance  |  | 4b.                      | ·   | 36.00   |
|                | 4c. Home              | maintenance, re                                      | epair, and upkeep expenses   |  | 4c.                      | \$  | 0.00  |

4d. \$

5. \$

0.00

0.00

4d. Homeowner's association or condominium dues

Additional mortgage payments for your residence, such as home equity loans

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|     | tor 1 John M Walker tor 2 Kiahini N Dupont   | Case num                       | ber (if known)               |                             |
|-----|--|--------------------------------|------------------------------|-----------------------------|
| 6.  | Utilities:   |                                |                              |                             |
| -   | 6a. Electricity, heat, natural gas   | 6a.                            | \$                           | 395.00                      |
|     | 6b. Water, sewer, garbage collection   | 6b.                            | \$                           | 95.00                       |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.                            | \$                           | 315.00                      |
|     | 6d. Other. Specify: Cable/Internet   | 6d.                            | \$                           | 145.00                      |
| 7.  | Food and housekeeping supplies   | 7.                             | \$                           | 1,100.00                    |
| 8.  | Childcare and children's education costs   | 8.                             |                              | 290.00                      |
| 9.  | Clothing, laundry, and dry cleaning  | 9.                             | ·                            | 200.00                      |
| 10. |  | 10.                            | ·                            | 200.00                      |
|     | Medical and dental expenses  | 11.                            | \$                           | 150.00                      |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare.  | 12.                            | \$                           | 500.00                      |
| 13  | Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.                            | ·                            | 100.00                      |
|     | Charitable contributions and religious donations   | 14.                            | ·                            | 314.00                      |
|     | Insurance.   | 1-7.                           | Ψ                            | 314.00                      |
| 10. | Do not include insurance deducted from your pay or included in lines 4 or 20.  |                                |                              |                             |
|     | 15a. Life insurance  | 15a.                           | \$                           | 0.00                        |
|     | 15b. Health insurance  | 15b.                           | \$                           | 0.00                        |
|     | 15c. Vehicle insurance   | 15c.                           | \$                           | 300.00                      |
|     | 15d. Other insurance. Specify:   | 15d.                           | \$                           | 0.00                        |
| 16. | <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.  | _                              |                              |                             |
|     | Specify:   | 16.                            | \$                           | 0.00                        |
| 17. | Installment or lease payments:   | 47-                            | φ.                           | 000.00                      |
|     | 17a. Car payments for Vehicle 1  | 17a.                           | ·                            | 380.00                      |
|     | 17b. Car payments for Vehicle 2  | 17b.                           | ·                            | 215.00                      |
|     | 17c. Other Specify: Furniture  | 17c.                           | ·                            | 140.00                      |
| 40  | 17d. Other. Specify:   | 17d.                           | <b>&gt;</b>                  | 0.00                        |
| 10. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  | 18.                            | \$                           | 0.00                        |
| 19. |  |                                | \$                           | 400.00                      |
|     | Specify: Assistance for elderly mother   | 19.                            | ·                            |                             |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Sched   | lule I: Yo                     | our Income.                  |                             |
|     | 20a. Mortgages on other property   | 20a.                           |                              | 0.00                        |
|     | 20b. Real estate taxes   | 20b.                           | \$                           | 0.00                        |
|     | 20c. Property, homeowner's, or renter's insurance  | 20c.                           | \$                           | 0.00                        |
|     | 20d. Maintenance, repair, and upkeep expenses  | 20d.                           | \$                           | 0.00                        |
|     | 20e. Homeowner's association or condominium dues   | 20e.                           | \$                           | 0.00                        |
| 21. | Other: Specify:  | 21.                            | +\$                          | 0.00                        |
| 22  | Calculate your monthly expenses  | _                              |                              |                             |
| 22. | 22a. Add lines 4 through 21.   |                                | <b>e</b>                     | 7,600.00                    |
|     | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |                                | \$                           | 7,000.00                    |
|     |  |                                | ·                            |                             |
|     | 22c. Add line 22a and 22b. The result is your monthly expenses.  |                                | \$                           | 7,600.00                    |
| 23. | Calculate your monthly net income.   |                                |                              |                             |
|     | 23a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a.                           | \$_                          | 7,634.17                    |
|     | 23b. Copy your monthly expenses from line 22c above.   | 23b.                           | -\$                          | 7,600.00                    |
|     |  |                                |                              |                             |
|     | 23c. Subtract your monthly expenses from your monthly income.  | 23c.                           | \$                           | 34.17                       |
|     | The result is your monthly net income.   | 230.                           | Ψ                            | 07.17                       |
| 24. | Do you expect an increase or decrease in your expenses within the year after you For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? | ı <b>file this</b><br>nortgage | s form?<br>payment to increa | se or decrease because of a |
|     | ■ No.  |                                |                              |                             |
|     | Yes. Explain here:   |                                |                              |                             |

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| Fill in this infor   | mation to identify your                           | case:   |  |
|----------------------|---|---|--|
| Debtor 1             | John M Walker                                     |   |  |
|                      | First Name  | Middle Name Last Name                               |  |
| Debtor 2             | Kiahini N Dupont                                  |   |  |
| (Spouse if, filing)  | First Name  | Middle Name Last Name                               |  |
| United States Ba     | ankruptcy Court for the:                          | NORTHERN DISTRICT OF ILLINOIS                       |  |
| Case number          |   |   |  |
| (if known)           |   |   | ☐ Check if this is an amended filing   |
| Official Forr        |   | n Individual Debtor's Sch                           | nedules 12/15  |
| <del>Dooral at</del> | ion About t                                       | II III ai via aai Bobtoi o coi                      | 12/13  |
| ears, or both. 1     | 8 U.S.C. §§ 152, 1341, <sup>,</sup><br>n Below    |   | fines up to \$250,000, or imprisonment for up to 20  |
| Did you pa           | y or agree to pay some                            | one who is NOT an attorney to help you fill out bar | nkruptcy forms?  |
| ■ No                 |   |   |  |
| ☐ Yes. N             | Name of person                                    |   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| •                    | lity of perjury, I declare<br>e true and correct. | that I have read the summary and schedules filed    | with this declaration and  |
| X /s/.loh            | n M Walker  | X /s/ Kiahini N                                     | Dunont   |
|                      | M Walker  | Kiahini N Du  |  |
| Signatu              | re of Debtor 1                                    | Signature of De                                     |  |
| Date                 | November 26, 2017                                 | Date <b>Nover</b>                                   | mber 26, 2017  |

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| Fill         | in this inforr                                | nation to identify you  | case:   |                                       |                                   |   |           |   |
|--------------|---|---|---|---------------------------------------|-----------------------------------|---|-----------|---|
| Deb          | otor 1  | John M Walker   |   |                                       |                                   |   |           |   |
| Det          | otor 2  | First Name  | Middle Name   | Last Na                               | me                                |   |           |   |
|              | use if, filing)                               | Kiahini N Dupon<br>First Name   | Middle Name   | Last Na                               | me                                |   |           |   |
| Unit         | ted States Ba                                 | inkruptcy Court for the:  | NORTHERN DISTRICT   | OF ILLINOIS                           |                                   |   |           |   |
|              |   |   |   |                                       |                                   |   |           |   |
| (if kn       | se number _                                   |   |   |                                       |                                   |   | _         | eck if this is an<br>nended filing                    |
|              | ficial Fo                                     |   | Affairs for Indivi  | duals Fil                             | ing for B                         | ankruptcy                                 |           | 4/10  |
| Be a<br>info | s complete a<br>rmation. If m<br>ber (if know | and accurate as possi<br>nore space is needed,<br>n). Answer every ques | ble. If two married people<br>attach a separate sheet to<br>stion.                      | are filing toge<br>this form. Or      | ether, both are<br>the top of any | equally responsible                       |           |   |
| Par          | t 1: Give I                                   | Details About Your Ma   | rital Status and Where Yo   | u Lived Befor                         | <u>e</u>                          |   |           |   |
| 1.           | What is you                                   | r current marital statu   | s?  |                                       |                                   |   |           |   |
|              | Married                                       | I   |   |                                       |                                   |   |           |   |
|              | □ Not ma                                      | rried   |   |                                       |                                   |   |           |   |
| 2.           | During the I                                  | ast 3 years, have you   | lived anywhere other thar   | n where you liv                       | /e now?                           |   |           |   |
|              | □ No  |   |   |                                       |                                   |   |           |   |
|              |   | st all of the places you I  | ived in the last 3 years. Do  | not include whe                       | ere vou live nov                  | ٧.  |           |   |
|              |   | rior Address:   | Dates Debtor  |                                       | btor 2 Prior Ad                   |   |           | Dates Debtor 2  |
|              | 23201 Kris<br>Plainfield,                     |   | From-To: <b>2015-2016</b>   | •                                     | Same as Debtor                    | 1   |           | Same as Debtor 1 From-To:                             |
|              | 66 Sonom<br>Romeovill                         | na Drive<br>le, IL 60446  | From-To:<br><b>2014-2015</b>  | -                                     | Same as Debtor                    | 1   |           | ■ Same as Debtor 1 From-To:                           |
|              |   |   | ver live with a spouse or le<br>lifornia, Idaho, Louisiana, N                           |                                       |                                   |   |           |   |
|              | ■ No  |   |   |                                       |                                   |   |           |   |
|              | ☐ Yes. Ma                                     | ake sure you fill out Scl   | nedule H: Your Codebtors (C   | Official Form 10                      | )6H).                             |   |           |   |
| Par          | t 2 Explai                                    | in the Sources of You   | r Income  |                                       |                                   |   |           |   |
|              | <u> </u>                                      |   |   |                                       |                                   |   |           |   |
| 4.           | Fill in the tota                              | al amount of income yo  | nployment or from operati<br>u received from all jobs and<br>have income that you recei | all businesses                        | , including part                  | -time activities.                         | us calend | dar years?  |
|              | □ No  |   |   |                                       |                                   |   |           |   |
|              | Yes. Fil                                      | I in the details.   |   |                                       |                                   |   |           |   |
|              |   |   | Debtor 1  |                                       |                                   | Debtor 2                                  |           |   |
|              |   |   | Sources of income<br>Check all that apply.  | Gross inc<br>(before de<br>exclusions | ductions and                      | Sources of income<br>Check all that apply |           | Gross income<br>(before deductions<br>and exclusions) |

Official Form 107

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Debtor 1 John M Walker
Debtor 2 Kiahini N Dupont Document Page 59 of 83

Case number (if known)

|   |  |   | Dahtan 4  |   | Dahtan 0  |  |
|---|--|---|---|---|---|--|
|   |  |   | Debtor 1  | Onese les estre   | Debtor 2  | One are in a series  |
|   |  |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions<br>and exclusions)  |
|   | y 1 of current<br>filed for bank   |   | ■ Wages, commissions, bonuses, tips   | \$90,101.25   | ■ Wages, commissions, bonuses, tips   | \$30,843.62  |
|   |  |   | ☐ Operating a business  |   | ☐ Operating a business  |  |
|   |  |   | ■ Wages, commissions, bonuses, tips   | \$7,326.00  | ☐ Wages, commissions, bonuses, tips   | \$0.00   |
|   |  |   | ☐ Operating a business  |   | ☐ Operating a business  |  |
| For last calendar year:<br>(January 1 to December 31, 2016)                     |  | ■ Wages, commissions, bonuses, tips   | \$97,799.00   | ■ Wages, commissions, bonuses, tips \$27,47   |   |  |
|   |  |   | ☐ Operating a business  |   | ☐ Operating a business  |  |
|   | dar year befo<br>December 31   |   | ■ Wages, commissions, bonuses, tips   | \$97,000.00   | ■ Wages, commissions, bonuses, tips   | \$25,000.00  |
|   |  |   | ☐ Operating a business  |   | ☐ Operating a business  |  |
| Include in<br>and other<br>winnings.  | come regardle<br>public benefit<br>If you are filing   | ess of wheth<br>payments; pg a joint cas  | pensions; rental income; inte<br>e and you have income that   | amples of other income are a  | •   |  |
| Include in and other winnings.  List each                                       | come regardle<br>public benefit<br>If you are filing   | ess of wheth<br>payments;<br>g a joint cas<br>e gross inco  | er that income is taxable. Ex-<br>pensions; rental income; inte<br>e and you have income that   | amples of other income are a rest; dividends; money collection you received together, list it contact the contact in the contact is the contact and the contact in the cont  | ted from lawsuits; royalties; an<br>inly once under Debtor 1.   |  |
| Include in and other winnings.  List each                                       | come regardle<br>public benefit<br>If you are filing<br>source and the   | ess of wheth<br>payments;<br>g a joint cas<br>e gross inco  | er that income is taxable. Ex-<br>pensions; rental income; inte<br>e and you have income that in<br>me from each source separa  | amples of other income are a rest; dividends; money collection you received together, list it contelly. Do not include income the   | ted from lawsuits; royalties; an inly once under Debtor 1.  nat you listed in line 4.  Debtor 2   | nd gambling and lottery  |
| Include in and other winnings.  List each                                       | come regardle<br>public benefit<br>If you are filing<br>source and the   | ess of wheth<br>payments;<br>g a joint cas<br>e gross inco  | er that income is taxable. Ex-<br>pensions; rental income; inte<br>e and you have income that t<br>me from each source separa   | amples of other income are a rest; dividends; money collection you received together, list it contact the contact in the contact is the contact and the contact in the cont  | ted from lawsuits; royalties; an inly once under Debtor 1. nat you listed in line 4.  |  |
| Include in and other winnings.  List each  No Yes.                              | come regardle public benefit If you are filing source and the Fill in the deta   | ess of wheth<br>payments;  <br>g a joint cas<br>e gross inco  | er that income is taxable. Ex- pensions; rental income; inte e and you have income that me from each source separa  Debtor 1 Sources of income  | amples of other income are a rest; dividends; money collect you received together, list it outlet. Do not include income the second of the sec  | ted from lawsuits; royalties; an inly once under Debtor 1.  nat you listed in line 4.  Debtor 2  Sources of income  | Gross income (before deductions  |
| Include in and other winnings.  List each  No Yes.                              | come regardle public benefit If you are filing source and the Fill in the deta to the Certain Pays or Debtor 1's or Neither Debindividual pring the 9  | ess of wheth payments;   g a joint cas e gross inco ails.  ments You or Debtor 2' otor 1 nor Dimarily for a 0 days befo Go to line 7 List below e | er that income is taxable. Expensions; rental income; interes and you have income that it me from each source separate.  Debtor 1 Sources of income Describe below.  Made Before You Filed for seebtor 2 has primarily consume personal, family, or househouse you filed for bankruptcy, deach creditor to whom you pa  | amples of other income are a rest; dividends; money collect you received together, list it of tely. Do not include income the   | ted from lawsuits; royalties; an inly once under Debtor 1.  Debtor 2 Sources of income Describe below.  I of \$6,425* or more?  In one or more payments and the inly once in the same of th | Gross income (before deductions and exclusions)  |
| Include in and other winnings.  List each  No Yes.                              | t Certain Payer  T Debtor 1's of Neither Debindividual pring the 9  During the 9  Yes  | ments You  or Debtor 2' tor 1 nor D  imarily for a  0 days befo Go to line 7  List below e paid that cre not include                              | er that income is taxable. Expensions; rental income; interes and you have income that it me from each source separate.  Debtor 1 Sources of income Describe below.  Made Before You Filed for separate debts primarily consumers and personal, family, or househout the you filed for bankruptcy, described for bankruptcy and payments to an attorney for the payments to an attorney for | amples of other income are a rest; dividends; money collect you received together, list it could be a compared to telly. Do not include income the seach source (before deductions and exclusions)  Bankruptcy  r debts?  umer debts. Consumer debts id purpose."  id you pay any creditor a total id a total of \$6,425* or more ints for domestic support oblighis bankruptcy case.   | ted from lawsuits; royalties; an inly once under Debtor 1.  Debtor 2 Sources of income Describe below.  I of \$6,425* or more?  | Gross income (before deductions and exclusions)  11(8) as "incurred by an the total amount you and alimony. Also, do   |
| Include in and other winnings.  List each  No Yes.  Part 3: List  Are eithe No. | come regardle public benefit If you are filing source and the Fill in the deta to the Certain Payer Pebtor 1's or Neither Debindividual pring the 9 No. Yes  * Subject to Debtor 1 or          | ments You  or Debtor 2' tor 1 nor D imarily for a 0 days befo Go to line 7 List below e paid that cre not include adjustment Debtor 2 o           | er that income is taxable. Expensions; rental income; interes and you have income that it me from each source separate.  Debtor 1 Sources of income Describe below.  Made Before You Filed for separate bettor 2 has primarily consume personal, family, or househous personal, family, or househous personal include payments to an attorney for the on 4/01/19 and every 3 years both have primarily consumers both have primarily consumers.   | amples of other income are a rest; dividends; money collect you received together, list it could be a compared to telly. Do not include income the seach source (before deductions and exclusions)  Bankruptcy  r debts?  Limer debts. Consumer debtald purpose."  id you pay any creditor a total id a total of \$6,425* or more into the source of the source of the source into the source of the source | ted from lawsuits; royalties; an inly once under Debtor 1.  Debtor 2 Sources of income Describe below.  I of \$6,425* or more?  In one or more payments and the ations, such as child support a correct the date of adjustment.   | Gross income (before deductions and exclusions)  on (8) as "incurred by article total amount you and alimony. Also, do |
| Include in and other winnings.  List each  No Yes.  Part 3: List  Are eithe No. | come regardle public benefit If you are filing source and the Fill in the deta to Certain Payer Pebtor 1's or Neither Debindividual pring the 9 No. Yes  * Subject to Debtor 1 or During the 9 | ments You  or Debtor 2' tor 1 nor D imarily for a 0 days befo Go to line 7 List below e paid that cre not include adjustment Debtor 2 o           | er that income is taxable. Expensions; rental income; interes and you have income that it me from each source separate.  Debtor 1 Sources of income Describe below.  Made Before You Filed for separate betor 2 has primarily consume personal, family, or househous personal, family, or househous personal include payments to an attorney for the on 4/01/19 and every 3 years to both have primarily consumer you filed for bankruptcy, directly and every 3 years are you filed for bankruptcy, directly and for bankruptcy, directly and for bankruptcy, directly and you filed for bankruptcy.   | amples of other income are a rest; dividends; money collect you received together, list it of tely. Do not include income the tely. Do not include include the tely. Do not include include the tely. The tely include the tely included include the tely included include the tely included included include the tely included inc  | ted from lawsuits; royalties; an inly once under Debtor 1.  Debtor 2 Sources of income Describe below.  I of \$6,425* or more?  In one or more payments and the ations, such as child support a correct the date of adjustment.   | Gross income (before deductions and exclusions)  on (8) as "incurred by article total amount you and alimony. Also, do |

**Creditor's Name and Address** 

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Case 17-35110 Doc 1 Filed 11/26/17 Entered 11/26/17 22:12:49 Desc Main Page 60 of 83 Document Debtor 1 John M Walker Debtor 2 Kiahini N Dupont Case number (if known) **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Burl/chi C/u Last 3 months \$0.00 \$14,144.00 ☐ Mortgage 5601 W 26th St ☐ Car **Cicero, IL 60605** ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Motorcycle Ally Financial \$0.00 \$10,830.00 Last 3 months ☐ Mortgage Attn: Bankruptcy Car Po Box 380901 ☐ Credit Card **Bloomington, MN 55438** ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other\_ Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Dates of payment** Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Cavalry SPV I LLC v John Walker Will County Circuit Clerk Civil □ Pending 17SC2973 14 W Jefferson □ On appeal Joliet, IL 60432 Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

■ No. Go to line 11.

Yes. Fill in the information below.

Creditor Name and Address

Describe the Property

Date

Value of the property

Explain what happened

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Debtor 1 John M Walker Debtor 2 Kiahini N Dupont Case number (if known) **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** Hyundai Finc 2015 Hyundai Sonata 10/25/17 Unknown Attn: Bankruptcy Po Box 20809 Property was repossessed. Fountain City, CA 92728 ☐ Property was foreclosed. ☐ Property was garnished. □ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Amount Date action was 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Value Dates you more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) \$340.00 **Words Way** Cash monthly Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred lost

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.* 

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| Deb | otor 2        | Kiahini N Dupont   |   | Case number         | (if known)                              |                    |  |  |  |  |  |  |
|-----|---------------|--|---|---------------------|---|--------------------|--|--|--|--|--|--|
| Dat | 4 7.          | Liet Certain Bermante en Transfera   |   |                     |   |                    |  |  |  |  |  |  |
| Par | τ /:          | List Certain Payments or Transfers   |   |                     |   |                    |  |  |  |  |  |  |
| 16. | consi         | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. |   |                     |   |                    |  |  |  |  |  |  |
|     |               | No   |   |                     |   |                    |  |  |  |  |  |  |
|     |               | Yes. Fill in the details.  |   |                     |   |                    |  |  |  |  |  |  |
|     |               | on Who Was Paid  | Description and value of any prop   | perty               | Date payment                            | Amount o           |  |  |  |  |  |  |
|     |               | ress<br>ill or website address<br>on Who Made the Payment, if Not You  | transferred   |                     | or transfer was made                    | paymen             |  |  |  |  |  |  |
|     | 77 V<br>Chic  | ason & Gleason LLC<br>V. Washington, Ste 1218<br>cago, IL 60602<br>://chilawyers.com   | \$90.00 attorney fees plus \$335 filing fee.                                | 5.00 court          | 2017                                    | \$425.00           |  |  |  |  |  |  |
|     | 4800          | nmit Financial Education Inc<br>0 E Flower St<br>son, AZ 85712   | Credit Counseling   |                     | 2017                                    | \$14.95            |  |  |  |  |  |  |
| 17. | prom<br>Do no | in 1 year before you filed for bankruptcy, issed to help you deal with your creditors of include any payment or transfer that you  | s or to make payments to your creditor                                      |                     | or transfer any prope                   | erty to anyone who |  |  |  |  |  |  |
|     |               | Yes. Fill in the details.  |   |                     |   |                    |  |  |  |  |  |  |
|     | Pers<br>Addı  | on Who Was Paid<br>ress  | Description and value of any prop<br>transferred                            | perty               | Date payment<br>or transfer was<br>made | Amount o<br>paymen |  |  |  |  |  |  |
| 18. | Includinclud  | in 2 years before you filed for bankruptogered in the ordinary course of your bused both outright transfers and transfers made gifts and transfers that you have already No  Yes. Fill in the details.   | siness or financial affairs?<br>de as security (such as the granting of a s |                     |   |                    |  |  |  |  |  |  |
|     | Pers          | on Who Received Transfer   | Description and value of  | Describe a          | any property or                         | Date transfer was  |  |  |  |  |  |  |
|     | Addı          | ress   | property transferred  | payments paid in ex | received or debts                       | made               |  |  |  |  |  |  |
|     | Pers          | on's relationship to you   |   | paid iii ex         | change                                  |                    |  |  |  |  |  |  |
|     | Jani          | ie   | Sold 2006 Suzuki JSXR   | Rcvd \$30           | 000-2000                                | 3/2016             |  |  |  |  |  |  |
| 19. | benef         | in 10 years before you filed for bankruptoficiary? (These are often called asset-protents) No Yes. Fill in the details.  |   |                     |   | of which you are a |  |  |  |  |  |  |
|     | Halil         | o or aust  | Description and value of the prop   | orty transier       | ou -                                    | made               |  |  |  |  |  |  |
|     |               |  |   |                     |   |                    |  |  |  |  |  |  |

John M Walker

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Debtor 1 John M Walker Debtor 2 Kiahini N Dupont

Case number (if known)

| Par | t 8:  | List of Certain Financial Accounts, Ir   | nstrun   | nents, Safe Depos  | sit Boxes, and St          | orage Unit | s  |   |  |  |
|-----|---|--|--|--|----------------------------|------------|--|---|--|--|
| 20. | <ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?</li> <li>Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.</li> </ul> |  |  |  |                            |            |  |   |  |  |
|     | Yes. Fill in the details.   |  |  |  |                            |            |  |   |  |  |
|     | Na  | me of Financial Institution and dress (Number, Street, City, State and ZIP   |  | et 4 digits of<br>count number                             | Type of account instrument | ınt or     | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |  |  |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  |  |  |  |                            |            |  |   |  |  |
|     |   | No<br>Yes. Fill in the details.  |  |  |                            |            |  |   |  |  |
|     |   |  |  |  |                            |            |  | 5 (111  |  |  |
|     |   | me of Financial Institution dress (Number, Street, City, State and ZIP Code)   |  | Who else had ac<br>Address (Number,<br>State and ZIP Code) |                            | Describe   | the contents   | Do you still have it?                         |  |  |
| 22. | Hav   | ve you stored property in a storage unit   | or pla   | ace other than you   | ur home within 1           | year befor | re you filed for bankruptcy                          | /?  |  |  |
|     | ■ No  |  |  |  |                            |            |  |   |  |  |
|     |   | Yes. Fill in the details.  |  |  |                            |            |  |   |  |  |
|     |   | me of Storage Facility<br>dress (Number, Street, City, State and ZIP Code)   | Who else has or had access  to it?  Address (Number, Street, City, State and ZIP Code) |  |                            |            | Do you still have it?                                |   |  |  |
| Par | t 9:  | Identify Property You Hold or Contro   | l for S  | ,  |                            |            |  |   |  |  |
| 23. |   | you hold or control any property that so someone.  | omeo   | ne else owns? Inc  | clude any propert          | y you bori | rowed from, are storing fo                           | or, or hold in trust                          |  |  |
|     | _   |  |  |  |                            |            |  |   |  |  |
|     |   | ■ No   |  |  |                            |            |  |   |  |  |
|     | Yes. Fill in the details.   |  |  |  |                            |            |  |   |  |  |
|     |   | vner's Name<br>Idress (Number, Street, City, State and ZIP Code)   |  | Where is the pro<br>(Number, Street, City<br>Code)         |                            | Describe   | the property   | Value   |  |  |
| Par | t 10:   | Give Details About Environmental In  | forma  | tion   |                            |            |  |   |  |  |
| For | the p   | ourpose of Part 10, the following definit  | ions a   | apply:   |                            |            |  |   |  |  |
|     | toxi  | vironmental law means any federal, stat<br>ic substances, wastes, or material into<br>ulations controlling the cleanup of thes | the ai   | r, land, soil, surfa                                       | ce water, ground           | • .        | •  |   |  |  |
|     |   | e means any location, facility, or proper<br>own, operate, or utilize it, including disp                                       | -  |  | environmental l            | aw, wheth  | er you now own, operate,                             | or utilize it or used                         |  |  |
|     | Haz   | zardous material means anything an en<br>ardous material, pollutant, contaminan  | vironr   | nental law defines   | s as a hazardous           | waste, ha  | zardous substance, toxic                             | substance,                                    |  |  |
| Rep | ort a   | all notices, releases, and proceedings the   | nat yo   | u know about, reg  | gardless of when           | they occu  | ırred.   |   |  |  |
| 24. | Has   | any governmental unit notified you that  | at you   | may be liable or   | potentially liable         | under or i | n violation of an environn                           | nental law?                                   |  |  |
|     |   | No   |  |  |                            |            |  |   |  |  |
|     | _   | Yes. Fill in the details.  |  |  |                            |            |  |   |  |  |
|     | Name of site Governmental unit Environmental law, if you Date of notice   |  |  |  |                            |            |  |   |  |  |
|     | Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  |  |  |  |                            |            |  |   |  |  |

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|             | otor 2          | Kiahini N Dupont   |                                    |   | Cas      | e number (if known)  |                   |  |  |  |  |
|-------------|-----------------|--|------------------------------------|---|----------|--|-------------------|--|--|--|--|
| _           |                 |  |                                    |   |          |  |                   |  |  |  |  |
| 25.         | Have            | you notified any governmental unit of  | f any release of h                 | azardous material?                          |          |  |                   |  |  |  |  |
|             |                 | No   |                                    |   |          |  |                   |  |  |  |  |
|             |                 | Yes. Fill in the details.  |                                    |   |          |  |                   |  |  |  |  |
|             |                 | ne of site<br>ress (Number, Street, City, State and ZIP Code)  | Governme<br>Address (<br>ZIP Code) | ental unit<br>Number, Street, City, State a |          | Environmental law, if you know it                                | Date of notice    |  |  |  |  |
| 26.         | Have            | you been a party in any judicial or ad   | ministrative proc                  | eeding under any env                        | vironm   | nental law? Include settlements                                  | and orders.       |  |  |  |  |
|             |                 | M-   |                                    |   |          |  |                   |  |  |  |  |
|             | _               | No<br>Yes. Fill in the details.  |                                    |   |          |  |                   |  |  |  |  |
|             |                 | e Title  | Court or a                         | igency                                      | Nat      | ure of the case  | Status of the     |  |  |  |  |
|             | Cas             | e Number   | Name                               | Number, Street, City,                       |          |  | case              |  |  |  |  |
| Par         | t 11:           | Give Details About Your Business or  | Connections to                     | Any Business                                |          |  |                   |  |  |  |  |
| 7.          | Withi           | in 4 years before you filed for bankrup  | tcv. did vou own                   | a business or have a                        | nv of    | the following connections to an                                  | v husiness?       |  |  |  |  |
| •••         |                 | ☐ A sole proprietor or self-employed   | •                                  |   | •        |  | y zacinicos.      |  |  |  |  |
|             |                 | ☐ A member of a limited liability com  | _                                  | _   |          | -  |                   |  |  |  |  |
|             |                 |  | party (LLO) or ini                 | med hability partiters                      |          | <i>,</i>   |                   |  |  |  |  |
|             |                 | □ A partner in a partnership □ An officer, director, or managing executive of a corporation  |                                    |   |          |  |                   |  |  |  |  |
|             |                 | ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation                       |                                    |   |          |  |                   |  |  |  |  |
|             | _               |  |                                    | rities of a corporation                     | 1        |  |                   |  |  |  |  |
|             |                 | No. None of the above applies. Go to Part 12.  Ves. Check all that apply above and fill in the details below for each business.                                    |                                    |   |          |  |                   |  |  |  |  |
|             |                 |  |                                    |   |          |  |                   |  |  |  |  |
|             |                 | iness Name<br>ress   | Describe the n                     | ature of the business                       | •        | Employer Identification number<br>Do not include Social Security |                   |  |  |  |  |
|             | (Num            | ber, Street, City, State and ZIP Code)   | Name of accou                      | intant or bookkeeper                        |          | Dates business existed   |                   |  |  |  |  |
| 28.         |                 | in 2 years before you filed for bankrup<br>utions, creditors, or other parties.  | tcy, did you give                  | a financial statement                       | to an    | yone about your business? Incl                                   | ude all financial |  |  |  |  |
|             |                 | No   |                                    |   |          |  |                   |  |  |  |  |
|             |                 | Yes. Fill in the details below.  |                                    |   |          |  |                   |  |  |  |  |
|             | Nam             | ne<br>ress   | Date Issued                        |   |          |  |                   |  |  |  |  |
|             |                 | ber, Street, City, State and ZIP Code)   |                                    |   |          |  |                   |  |  |  |  |
| Par         | t 12:           | Sign Below   |                                    |   |          |  |                   |  |  |  |  |
| are t       | true a<br>a bar | d the answers on this <i>Statement of Fi</i><br>nd correct. I understand that making a<br>nkruptcy case can result in fines up to<br>§§ 152, 1341, 1519, and 3571. | false statement                    | concealing property                         | , or ob  | taining money or property by fr                                  |                   |  |  |  |  |
| /s/         | John            | M Walker   | _                                  | ahini N Dupont                              |          |  |                   |  |  |  |  |
|             |                 | Walker<br>e of Debtor 1  |                                    | ni N Dupont<br>cure of Debtor 2             |          |  |                   |  |  |  |  |
| Dat         |                 |  | Date                               |   | 47       |  |                   |  |  |  |  |
|             |                 | ovember 26, 2017   |                                    | November 26, 20                             |          |  |                   |  |  |  |  |
| Did∶<br>■ N | -               | ttach additional pages to Your Statem  | ent of Financial /                 | Affairs for Individuals                     | Filing   | for Bankruptcy (Official Form 1                                  | 07)?              |  |  |  |  |
| ■ N<br>□ Y  |                 |  |                                    |   |          |  |                   |  |  |  |  |
|             | you p           | ay or agree to pay someone who is no   | et an attorney to I                | nelp you fill out bankr                     | ruptcy   | forms?   |                   |  |  |  |  |
| _           |                 | ame of Person Attach the Bankru  | uptcy Petition Pre                 | parer's Notice, Declara                     | tion, aı | nd Signature (Official Form 119).                                |                   |  |  |  |  |
|             | ial Forn        |  |                                    | fairs for Individuals Filir                 |          | • ,  | page              |  |  |  |  |

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Debtor 1 John M Walker

Debtor 2 Kiahini N Dupont Case number (if known)

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| Fill in this inform                | nation to identify your ca                        | ase:                 |   | 8  |
|------------------------------------|---|----------------------|---|--|
| Debtor 1                           | John M Walker                                     |                      |   |  |
|                                    | First Name  | Middle Name          | Last Name   |  |
| Debtor 2                           | Kiahini N Dupont                                  | Middle Norma         | Last Name   |  |
| (Spouse if, filing)                | First Name  | Middle Name          | Last Name   |  |
| United States Bar                  | nkruptcy Court for the:                           | NORTHERN DIST        | RICT OF ILLINOIS  |  |
| Case number                        |   |                      |   | Check if this is an amended filing                     |
| Official For                       |   | n for Indiv          | iduals Filing Under Chapt   | ter 7 12/15  |
| If you are an indiv                | vidual filing under chap                          | ter 7, you must fill | out this form if:   |  |
|                                    | claims secured by you                             | -                    |   |  |
| You must file this                 | ver is earlier, unless the                        | hin 30 days after    | ot expired.<br>you file your bankruptcy petition or by the date<br>e time for cause. You must also send copies to t |  |
|                                    | ople are filing together i<br>d date the form.    | n a joint case, bo   | th are equally responsible for supplying correct  | information. Both debtors must                         |
|                                    | and accurate as possible<br>our name and case num |                      | needed, attach a separate sheet to this form. O   | n the top of any additional pages,                     |
| Part 1: List Yo                    | our Creditors Who Have                            | Secured Claims       |   |  |
| Fait I. List 10                    | ul Creditors Wild Have                            | Secured Claims       |   |  |
| 1. For any credito information bel | -   | t 1 of Schedule D    | Creditors Who Have Claims Secured by Prope  | rty (Official Form 106D), fill in the                  |
|                                    | editor and the property the                       | at is collateral     | What do you intend to do with the property th secures a debt?   | at Did you claim the property as exempt on Schedule C? |
| Creditor's <b>A</b> o              | cceptance Now                                     |                      | ☐ Surrender the property. ☐ Retain the property and redeem it.  | □ No   |
| Description of                     |   |                      | Retain the property and enter into a  | ■ Yes  |
| property                           |   |                      | Reaffirmation Agreement.  Retain the property and [explain]:  |  |
| securing debt:                     |   |                      | The tain the property and [explain].  | _  |
| Creditor's Al                      | lly Financial                                     |                      | ☐ Surrender the property. ☐ Retain the property and redeem it.  | □No  |
|                                    |   |                      | Retain the property and enter into a  | Yes  |
| Description of                     | 2009 Ford Expedition                              | on 134000            | Reaffirmation Agreement.  |  |
| property<br>securing debt:         |   |                      | ☐ Retain the property and [explain]:  | _  |
| Creditor's Bu                      | url/chi C/u                                       |                      | ☐ Surrender the property.   |  |
| name:                              |   |                      | Retain the property and redeem it.  |  |
| Description of                     | 2016 Harley Davids                                | on RD Glide          | Retain the property and enter into a<br>Reaffirmation Agreement.  | ■ Yes  |
| property                           | 3000 miles<br>NADA                                |                      | ☐ Retain the property and [explain]:  |  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| ebtor 1 John M Walker ebtor 2 Kiahini N Dupont Case number (if known)   |  |                                   |
|---|--|-----------------------------------|
| securing debt:  |  | _                                 |
| Creditor's Harley Davidson Financial name:  | ☐ Surrender the property. ☐ Retain the property and redeem it.   | ■ No                              |
| Description of 2016 Harley Davidson Rd Glide  | Retain the property and enter into a Reaffirmation Agreement.  | ☐ Yes                             |
| property<br>securing debt:  | ☐ Retain the property and [explain]:   | _                                 |
| Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. U You may assume an unexpired personal property lease in | d in Schedule G: Executory Contracts and Unexpire<br>nexpired leases are leases that are still in effect; th | e lease period has not yet ended. |
| Describe your unexpired personal property leases  |  | Will the lease be assumed?        |
| Lessor's name: Description of leased Property:  |  | □ No □ Yes                        |
| Lessor's name: Description of leased  |  | □ No                              |
| Property:   |  | ☐ Yes                             |
| Lessor's name: Description of leased  |  | □ No                              |
| Property:   |  | ☐ Yes                             |
| Lessor's name:  |  | □ No                              |
| Description of leased<br>Property:  |  | ☐ Yes                             |
| Lessor's name:  |  | □ No                              |
| Description of leased<br>Property:  |  | ☐ Yes                             |
| Lessor's name:  |  | □ No                              |
| Description of leased<br>Property:  |  | ☐ Yes                             |
| Lessor's name:  |  | □ No                              |
| Description of leased Property:   |  | ☐ Yes                             |

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| Debtor<br>Debtor |        | ohn M Walker<br>iahini N Dupont  |                          |                    | Case number (if known)                                       |
|------------------|--------|--|--------------------------|--------------------|--|
|                  |        |  |                          |                    |  |
|                  |        |  |                          |                    |  |
|                  |        |  |                          |                    |  |
| Part 3:          | Sig    | n Below  |                          |                    |  |
|                  |        | y of perjury, I declare that I have ind<br>is subject to an unexpired lease. | icated my intention abou | t an               | y property of my estate that secures a debt and any personal |
| χ /s             | / Joh  | n M Walker   | x                        | /s/                | Kiahini N Dupont   |
| Jo               | ohn N  | l Walker   |                          | Kia                | ahini N Dupont   |
| Si               | gnatur | nature of Debtor 1 Signatu   |                          | nature of Debtor 2 |  |
| Da               | ate    | November 26, 2017  | Da                       | te                 | November 26, 2017  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing tee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-35110 Doc 1 Filed 11/26/17 Entered 11/26/17 22:12:49 Desc Main Document Page 73 of 83

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court**Northern District of Illinois

| In re      | John M Walker<br>n re Kiahini N Dupont   | Case No.            |                                    |
|------------|--|---------------------|------------------------------------|
|            | Debtor(s)  | Chapter             | 7                                  |
|            | DISCLOSURE OF COMPENSATION OF ATTORN   | NEY FOR DE          | CBTOR(S)                           |
| 1.         | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankr | r agreed to be paid | to me, for services rendered or to |
|            | For legal services, I have agreed to accept  | \$                  | 940.00                             |
|            | Prior to the filing of this statement I have received  |                     | 90.00                              |
|            | Balance Due  | \$                  | 850.00                             |
| 2.         | \$335.00 of the filing fee has been paid.  |                     |                                    |
| 3.         | The source of the compensation paid to me was:   |                     |                                    |
|            | ■ Debtor □ Other (specify):  |                     |                                    |
| 1.         | The source of compensation to be paid to me is:  |                     |                                    |
|            | ■ Debtor □ Other (specify):  |                     |                                    |
| 5.         | ■ I have not agreed to share the above-disclosed compensation with any other person un   | less they are memb  | pers and associates of my law firm |
|            | ☐ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the co  |                     |                                    |
| <b>5</b> . | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of  | of the bankruptcy c | ase, including:                    |
|            | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determ  |                     | file a petition in bankruptcy;     |
|            | <ul> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which m</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and</li> </ul>   |                     | rings thereof;                     |
|            | d. [Other provisions as needed]  a. Analysis of the debtor's financial situation, and rendering advice t   | •                   |                                    |
|            | petition in bankruptcy;  | o the deptor in t   | determining whether to me a        |
|            | b. Preparation and filing of any petition, schedules, statements of af   | fairs and plan w    | hich may be required;              |
|            | c. Representation of the debtor at the meeting of creditors and confi thereof;   | rmation hearing     | , and any adjourned hearings       |
| 7.         | By agreement with the debtor(s), the above-disclosed fee does not include the following so a. Representation of the debtors in any dischargeability actions, judgeoceeding.  |                     | nces, or any other adversary       |
|            | b. Debtor is responsible for the 2 mandatory credit counseling class   | ses.                |                                    |
|            | c. This fee agreement does not include representation in motions to  | redeem.             |                                    |

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| т.    | John M Walker    | C = N    |  |
|-------|------------------|----------|--|
| In re | Kiahini N Dupont | Case No. |  |
|       | Dehtor(s)        |          |  |

#### **DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

(Continuation Sheet)

|   | CERTIFICATION   |
|---|---|
| I certify that the foregoing is a complete stathis bankruptcy proceeding. | tement of any agreement or arrangement for payment to me for representation of the debtor(s) in |
| November 26, 2017   | /s/ Julie M Gleason   |
| Date  | Julie M Gleason 6273536   |
|   | Signature of Attorney   |
|   | Gleason & Gleason   |
|   | 77 W Washington, Ste 1218   |
|   | Chicago, IL 60602   |
|   | Name of law firm  |

Acceptance Now Attn: Bankruptcy 5501 Headquarters Dr Plano, TX 75024

Advance America Romeoville 482 N Weber Rd Romeoville, IL 60446

Afni Attn: Bankruptcy Po Box 3097 Bloomington, IL 61702

AIU Student Accounts 231 N Martindale Rd Schaumburg, IL 60173

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

AT & T Mobility Attn: Karen Cavagnaro, Paralegal One AT&T Way, Room 3A104 Bedminster, NJ 07921

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Bank of America Loss/Recovery 800 Market St Saint Louis, MO 63101

Best Buy 7601 Penn Avenue South Minneapolis, MN 55423

Burl/chi C/u 5601 W 26th St Cicero, IL 60605 Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cardworks/CW Nexus Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

Cavalry Portfolio Services Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595

Certegy Check Services PO Box 30046 Tampa, FL 33630

Chase 201 N. Walnut St/de1-1027 Wilmington, DE 19801

ChexSystems
7805 Hudson Rd, Ste 100
Saint Paul, MN 55125

Comcast Corporate Office Headquarters 1701 John F Kennedy Boulevard Philadelphia, PA 19103

Comcast PO Box 3002 Southeastern, PA 19398

ComEd
Attn Bankruptcy
PO Box 805379
Chicago, IL 60680

ComEd Attn: Bkcy Group 1919 Swift Dr Oak Brook Terrace, IL 60523 Comenity Bank/Ashley Stewart Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Comenity Bank/Gander Mountain Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bkl/Ulta Po Box 182125 Columbus, OH 18215

Comenitybank/New York AttN: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank Po Box 182125 Columbus, OH 43218

Continental Finance Co Cfc 121 Continental Dr #108 Newark, DE 19713

Convergent Outsourcing, Inc Po Box 9004 Renton, WA 98057

Credit Management, LP
The Offices of Credit Management, LP
Po Box 118288
Carrolton, TX 75011

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Diversified Consultants, Inc. Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255

Fifth Third Bank - Chicago 222 S Riverside Plaza, 33rd Flr Chicago, IL 60606

Fingerhut
Bankruptcy Dept
6250 Ridgewood Rd
Saint Cloud, MN 56303

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Flagship Credit Acceptance PO Box 3807 Coppell, TX 75019

Genesis Bankcard Srvs 15220 Nw Greenbrier Pkwy Ste 200 Beaverton, OR 97006

Ginny's 1112 7th Ave Monroe, WI 53566

Guaranty Bank PO Box 240200 Milwaukee, WI 53224-9410

Harley Davidson Financial Attention: Bankruptcy Po Box 22048 Carson City, NV 89721 Harvard Collection Attn: Bankruptcy 4839 N Elston Ave Chicago, IL 60630

Hyundai Finc Attn: Bankruptcy Po Box 20809 Fountain City, CA 92728

Illinois American Water 300 N Water Works Dr Belleville, IL 62223

Illinois Department of Human Serv. Cash Management Unit PO Box 19407 Springfield, IL 62794-9407

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kovach Eye Institute 1960 Springbrook Square Naperville, IL 60564

Mabt/contfin 121 Continental Dr Ste 1 Newark, DE 19713

Massey's Shoes PO box 2822 Monroe, WI 53556-8020 Maxlend PO Box 639 Parshall, ND 58770

Mccarthy Burgess & Wol 26000 Cannon Rd Cleveland, OH 44146

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Mid America Bk/total C 5109 S Broadband Ln Sioux Falls, SD 57108

Midnight Velvet Swiss Colony/Midnight Velvet 1112 7th Ave Monroe, WI 53566

Midnight Velvet 1112 7th Avenue Monroe, WI 53566

Nicor Gas Attention: Bankruptcy Department PO Box 549 Aurora, IL 60507

Nicor Gas Co. 1844 Ferry Road Naperville, IL 60563

Opportunity Financial 11 E Adams St, Suite 501 Chicago, IL 60603

Progressive 11629 S 700 E, Ste 250 Draper, UT 84020 Seventh Avenue 1112 7th Avenue Monroe, WI 53566

Shindler & Joyce 1990 E Algonquin #180 Schaumburg, IL 60173

Stoneberry PO Box 2820 Monroe, WI 53566

Surge PO Box 31292 Tampa, FL 33631

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target National Bank PO Box 9475 Minneapolis, MN 55440

TCF National Bank Attn: Bankruptcy 800 Burr Ridge Willowbrook, IL 60527

Transworld 9525 Sweet Valley Dr Cleveland, OH 44125 US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166

Verve PO box 31292 Tampa, FL 33631

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Will County Circuit Clerk 14 W Jefferson Joliet, IL 60432 Case 17-35110 Doc 1 Filed 11/26/17 Entered 11/26/17 22:12:49 Desc Main Document Page 83 of 83

#### United States Bankruptcy Court Northern District of Illinois

| In re | John M Walker<br>Kiahini N Dupont         |   | Case No.               |                      |
|-------|---|---|------------------------|----------------------|
|       | - damin'i Daponi                          | Debtor(s)                                 | Chapter 7              |                      |
|       | VI  | ERIFICATION OF CREDITOR M                 |                        |                      |
|       |   | Number of                                 | Creditors:             | 74                   |
|       | The above-named Debtor(s (our) knowledge. | ) hereby verifies that the list of credit | ors is true and correc | et to the best of my |
| Date: | November 26, 2017                         | /s/ John M Walker                         |                        |                      |
|       |   | John M Walker<br>Signature of Debtor      |                        |                      |
| Date: | November 26, 2017                         | /s/ Kiahini N Dupont<br>Kiahini N Dupont  |                        |                      |
|       |   | Signature of Debtor                       |                        |                      |